

Child Care and Development Fund (CCDF) Plan For Missouri FFY 2016-2018

1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

1.1.1 Which Lead Agency is designated to administer the CCDF program?

Identify the Lead Agency or joint inter-agency office designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals, and disallowance notifications to the designated contact identified here. (658D(a))

Name of Lead Agency: [Department of Social Services](#)

Address of Lead Agency: [PO Box 1082, Jefferson City, MO 65103](#)

Name and Title of the Lead Agency Official: [Brian Kinkade, Director](#)

Phone Number: [573-751-4815](#)

E-Mail Address: Brian.Kinkade@dss.mo.gov

Web Address for Lead Agency (if any): <http://dss.mo.gov/cd/childcare/>

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: [Cindy Burks](#)

Title of CCDF Administrator: [Program Administrator](#)

Address of CCDF Administrator: [PO Box 88, Jefferson City, MO 65103](#)

Phone Number: [573-751-6793](#)

E-Mail Address: Cindy.Burks@dss.mo.gov

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Phone Number:

E-Mail Address:

Description of the role of the Co-Administrator:

[n/a](#)

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): [573-751-6793](#)

Web Address for CCDF program (for the public) (if any):
<http://dss.mo.gov/cd/childcare/>

Web Address for CCDF program policy manual (if any):
<http://dss.mo.gov/cd/childcare/>

Web Address for CCDF program administrative rules (if any):
<http://dss.mo.gov/cd/childcare/>

1.1.3 Identify the agency/department/entity that is responsible for each of the major parts of CCDF administration and the name of the lead contact responsible for managing this portion of the Plan.

Outreach and Consumer Education (section 2)

Agency/Department/Entity [Children's Division](#)

Name of Lead Contact [Tasha Baker, Unit Manager Quality and Prevention](#)

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity [Children's Division](#)

Name of Lead Contact [Marianne Dawson, Unit Manager Operations](#)

Licensing/Monitoring (section 5)

Agency/Department/Entity [Children's Division](#)

Name of Lead Contact [Marianne Dawson, Unit Manager Operations](#)

Child Care Workforce (section 6)

Agency/Department/Entity [Children's Division](#)

Name of Lead Contact [Tasha Baker, Unit Manager Quality and Prevention](#)

Quality Improvement (section 7)

Agency/Department/Entity [Children's Division](#)

Name of Lead Contact [Tasha Baker, Unit Manager Quality and Prevention](#)

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity [Children's Division](#)

Name of Lead Contact [Marianne Dawson, Unit Manager Operations](#)

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

In other words, identify whether CCDF program rules and policies are established by the state or territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies.

Check one.

- ☒ All program rules and policies are set or established at the State/Territory level.
- ☐ Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

- ☒ Eligibility rules and policies (e.g., income limits) are set by the:

☒ State/Territory

☐ County.

If checked, describe the type of eligibility policies the county can set

N/A

☐ Other local entity (e.g., workforce boards, early learning coalitions).

If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set

N/A

☐ Other.

Describe:

N/A

- ☒ Sliding fee scale is set by the:

☒ State/Territory

☐ County

If checked, describe the type of sliding fee scale policies the county can set

N/A

☐ Other local entity (e.g., workforce boards, early learning coalitions).

If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set

N/A

☐ Other.

Describe:

N/A

- ☒ Payment rates are set by the:

☒ State/Territory

☐ County.

If checked, describe the type of payment rate policies the county can set

N/A

☐ Other local entity (e.g., workforce boards, early learning coalitions).

If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set

N/A

☐ Other.

Describe:

N/A

☐ Other.

List and describe (e.g., quality improvement systems, payment practices):

N/A

1.2.2 How is the CCDF program operated in your State/Territory?

In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing differences in eligibility or other policies across counties or other jurisdictions to ease family burden and confusion. Check all that apply. and describe the services performed by the entity and how the State/Territory ensures accountability that federal requirements are fully implemented by other agency(ies).

a) Who determines eligibility?

☐ CCDF Lead Agency

☒ TANF agency

Describe.

The TANF agency is responsible for all income maintenance programs; i.e. TANF, SNAP, Medicaid, etc. Having child care eligibility and authorization within the TANF agency streamlines application processes for applicants and recipients.

☐ Other State/Territory agency.

Describe.

N/A

☐ Local government agencies such as county welfare or social services departments

Describe.

N/A

☐ Child care resource and referral agencies

Describe.

N/A

☐ Community-based organizations

Describe.

N/A

☐ Other.

Describe.

N/A

b) Who assists parents in locating child care (consumer education)?

☐ CCDF Lead Agency

☐ TANF agency

Describe.

N/A

☐ Other State/Territory agency.

Describe.

N/A

☐ Local government agencies such as county welfare or social services departments

Describe.

N/A

☒ Child care resource and referral agencies

Describe.

[Child Care Aware of Missouri](#)

☐ Community-based organizations

Describe.

N/A

☐ Other.

Describe.

N/A

c) Who issues payments?

☐ CCDF Lead Agency

☒ TANF agency

Describe.

Payments are made through the TANF Agency's electronic system. Payment invoices are processed by the Division of Finance and Administrative Services. Note that the TANF agency, Division of Finance and Administrative Services and the Lead Agency are divisions within in the Department of Social Services.

☐ Other State/Territory agency.

Describe.

N/A

☐ Local government agencies such as county welfare or social services departments

Describe.

N/A

☐ Child care resource and referral agencies

Describe.

N/A

☐ Community-based organizations

Describe.

N/A

☐ Other.

Describe.

N/A

1.3 Consultation in the Development of the State Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply).

For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.

☒ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:

The Coordinating Board for Early Childhood was presented with the draft pre-print and recommendations on how to implement the requirements. The board has representatives from local government and businesses. In addition, information and requests for feedback on the draft plan were provided to members of the Municipal League of Missouri and the County Commissioners Association of Missouri.

☒ [REQUIRED IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe:

Presentations and discussions held with Coordinating Board of Early Childhood and its workgroups in the development of the state plan.

If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

☒ Yes,

☐ No.

If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and

family planning and policy

Lead agency has official representation and decision making role in the state advisory council.

☐ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes.

Describe, including which Tribe(s) you consulted with

N/A

☒ Check N/A if no Indian Tribes and/or Tribal organizations in the State

☒ State/Territory agency responsible for public education.

Describe:

Consulted with the Department of Elementary and Secondary Education in development of state plan.

☒ State agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool).

Describe:

Consulted with the Department of Elementary and Secondary Education, Early Childhood staff related to Part C in development of state plan.

☒ State/Territory institutions for higher education, including community colleges.

Describe:

Consulted with the Department of Elementary and Secondary Education in development of state plan.

☒ State/Territory agency responsible for child care licensing.

Describe:

Consulted with the Department of Health and Senior Services, Section for Child Care Regulation in development of state plan, MOU in place.

☒ State/Territory office/director for Head Start State collaboration

Describe:

Consulted with the MO Head Start State Collaboration Office (MHSSCO), MOU in place.

☒ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

Partner with the Early Head Start-Child Care Partnership grantees and MHSSCO. Lead Agency participates in project workgroup.

☒ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).

Describe:

Presented information on State Plan and consulted with staff from CACFP within the Department of Health and Senior Services.

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention

Describe:

N/A

☒ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.

Describe:

Consulted with the MO Afterschool Network, MO Child Care Accreditation, St. Louis Regional Child Care Council, St. Louis Fatherhood Center, Lutheran Family and Children Services, and Child Care Aware of Missouri.

☒ State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant

Describe:

Consulted with the Early Childhood Comprehensive System responsible for the implementation of the Maternal and Child Home Visitation program. Representation on the Early Childhood Comprehensive Services Steering Committee.

☒ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

Medicaid and EPSDT are within MO HealthNet, which is within the Department of Social Services.

☒ McKinney-Vento State coordinators for Homeless Education.

Describe:

Consulted with the Department of Elementary and Secondary Education, Coordinator of

McKinney-Vento Program. Shared information on local coordinators and state sub-grantees. Plan is to survey local coordinators on the demographics of homeless families served in their area. Information from survey will be used to plan for future services.

☒ State/Territory agency responsible for public health.

Describe:

Public Health Nurse Consultation representation participant in quarterly meetings with Lead Agency. CCDF state plan and changes due to reauthorization is standing agenda item for discussion.

☒ State/Territory agency responsible for mental health.

Describe:

Presentation of reauthorization act and corresponding changes to child care subsidy and quality services presented to the Coordinating Board for Early Childhood Mental Health Workgroup; on the workgroup are representatives from the Department of Mental Health and community mental health providers. Representative from Department of Mental Health serves on the Early Childhood Interagency Team.

☒ State/Territory agency responsible for child welfare.

Describe:

CCDF Lead Agency is the state's child welfare agency. Presentation and discussion of the draft state plan held with the agency's management team.

☒ State/Territory liaison for military child care programs.

Describe:

Missouri is one of 13 states participating in the DoD Military Child Care Liaison Project. The lead agency has met with the Liaison assigned to Missouri to assist in identifying current state efforts, priorities, and quality initiatives that impact the ability of military families to access high quality of installation child care services in their communities. The lead agency will collaborate with the Liaison to coordinate efforts in the planning and development of priorities and quality initiatives of mutual interest

☒ State/Territory agency responsible for employment services/workforce development.

Describe:

Consulted with Department of Economic Development and local Workforce Development entities and have entered into a pilot project to expedite application processing for subsidy.

☒ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

Consulted with the Family Support Division regarding the reauthorization act and corresponding changes to subsidy.

☒ State/community agencies serving refugee or immigrant families.

Describe:

Lead Agency presented draft changes to child care subsidy program to Family Support Division, Refugee Resettlement Program's contractors for resettlement services. Ongoing collaboration will consist of the Lead Agency participating in quarterly meetings with the resettlement agencies.

☒ Child care resource and referral agencies.

Describe:

Consulted on the development and implementation of the state plan with the statewide provider of Child Care Resource Referral and Training provider, Child Care Aware of Missouri.

☒ Provider groups or associations.

Describe:

Held focus group meetings with child care providers regarding the reauthorization act and subsequent changes to policy; presented to the St Louis Regional Council on Child Care.

☐ Worker organizations.

Describe:

N/A

☒ Parent groups or organizations.

Describe:

Held focus group meetings with parents regarding the reauthorization act and subsequent changes to policy.

☐ Other.

Describe:

N/A

1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)).

Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, the description should include:

a) Date(s) of notice of public hearing: 11/09/2015

Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.

Posted on Department of Social Services, Early Childhood website, email and Facebook posting by Child Care Aware, notices emailed to providers through the Department of Health and Senior Services, Section for Child Care Regulation, notice sent to all entities in which Lead Agency consulted with in the development of state plan and sent child care invoice message. Website links: <http://dss.mo.gov/cd/childcare/> and <http://mo.childcareaware.org/>.

c) Date(s) of public hearing(s): 12/01/2015

Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed In person in St. Louis, Springfield, Kansas City, Columbia, and Cape Girardeau, and a webinar during the work day statewide. Through the use of in-person public hearings and webinar format all geographic regions of the state were covered.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) [Draft state plan posted on Department of Social Services Early Childhood website, emailed drafts to stakeholders, early childhood advocates and to child care licensing agency.](#)

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? [Comments were reviewed and considered for plan adjustment by Lead Agency management team.](#)

1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe the strategies below, including any relevant links as examples.

☒ Working with advisory committees.

Describe:

[Presentation and discussions held with Coordinating Board for Early Childhood workgroups and posted at \[www.dss.mo.gov/CBEC/\]\(http://www.dss.mo.gov/CBEC/\)](#)

☒ Working with child care resource and referral agencies.

Describe:

[Missouri contracts with a statewide child care resource and referral agency and draft plan posted at \[www.mo.childcareaware.org/\]\(http://www.mo.childcareaware.org/\)](#)

☐ Providing translation in other languages.

Describe:

[N/A](#)

☒ Making available on the Lead Agency website.

List the website:

www.dss.mo.gov/cd/chilcare

☒ Sharing through social media (Twitter, Facebook, Instagram, email, etc.).

Describe:

[Facebook posting and email by Child Care Aware of Missouri.](#)

☒ Providing notification to stakeholders (e.g., provider groups, parent groups).

Describe:

[Emails sent by Department of Health and Senior Services, Section for Childcare Regulation, to licensed providers; Lead Agency email to provider and parent focus group attendees.](#)

☐ Other.

Describe:

[N/A](#)

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O))

Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

☒ [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.).

Describe:

Out of School Time contracts that deliver before and after school care have been expanded to include the preschool age population, allowing more families to be served and increasing the continuity of care and assisting the children enrolled in early childhood programs to receive full-day services. Lead Agency has established an interagency team, which includes Department of Elementary and Secondary Education, Department of Health and Senior

Services, Section for Childcare Regulation, Department of Mental Health, and the Missouri State Head Start Collaboration office to address implementation of inclusion services for children with special needs. Lead Agency collaborates with early childhood service providers, which includes but not limited to, early head start partnership grantees, Missouri Afterschool Network, Missouri Head Start Association, Missouri Head Start State Collaboration Office and the Early Childhood Comprehensive Services.

☐ [REQUIRED IF APPLICABLE] Tribal early childhood programs.

Describe, including which Tribes coordinating with:

☒ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.

☒ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities.

Describe:

Lead Agency has established an interagency team, which includes Department of Elementary and Secondary Education, Department of Health and Senior Services, Section for Childcare Regulation, Department of Mental Health, and the Missouri State Head Start Collaboration office to address implementation of inclusion services for children with special needs and the quality and availability of infant and toddler care.

☒ [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act).

Describe:

Coordination with the Head Start Collaboration office to assess needs and priorities and develop strategies to address the child care needs of homeless families. In addition, the Lead Agency has consulted with community service providers serving homeless families. As a result the Lead Agency has classified homeless children as special needs. Families will be eligible for full time child care by actively participating in a community based program providing services to eradicate homelessness. Families of children classified as special needs are not required to pay sliding fees and child care providers receive a 25% rate differential.

☒ [REQUIRED] Early childhood programs serving children in foster care.

Describe:

The Lead Agency is the state child welfare agency. As a result there is ongoing internal communication through the agencies Continuous Quality Improvement meetings and within the executive team meetings. Foster children are classified as special needs and resource parents are not required to pay sliding fees; child care providers receive a 25% rate differential, and resource parents do not pay copays.

☒ State/Territory agency responsible for child care licensing.

Describe:

Child care licensing is administered by the Department of Health and Senior Services, Section for Child Care Regulation. The Lead Agency, Section for Child Care Regulation, Child and Adult Food Program and the Division of Finance and Administrative Services meet on a monthly basis to discuss strategies to enhance child care services in Missouri for all children.

☒ State/Territory agency with Head Start State collaboration grant.

Describe:

The Lead Agency serves on the advisory board of the MHSSCO. Participation on the board involves the development of the five year strategic plan, review of the Missouri Needs Assessment and strategizes for areas of improvement and sets goals for improvement in early childhood services. Currently the Lead Agency and the MHSSCO are working on the development of a tool to articulate the areas of alignment between federal Early Head Start and Head Start with the state's Early Head Start program and the federal Early Head Start and Child Care Partnership grant programs. This tool will offer the opportunity to enhance service provision and continuity of care. In addition, areas in which the programs are not aligned will be defined and strategies developed to improve alignment.

☒ State Advisory Council authorized by the Head Start Act.

Describe:

The Coordinating Board for Early Childhood serves as the State Advisory Council. The Board is comprised of nine members appointed by the governor and representatives from the Departments of Social Services, Health and Senior Services, Elementary and Secondary Education, and Mental Health. The board has workgroups for early childhood mental health, healthcare, home visiting, professional development, and early care and education programs.

☒ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

There is ongoing collaboration and regular meetings aimed at building partnerships between the Lead Agency, the Head Start Collaboration office, Early Head Start grantees and Partnership grantees to align continuity of services for the families.

☒ McKinney-Vento State coordinators for Homeless Education or local educational agency
McKinney-Vento liaisons

Describe:

Met with the Department of Elementary and Secondary Education's McKinney-Vento Coordinator. Coordinator shared information on local coordinators and liaisons. Plan is to reach out to local liaisons prior to submission of state plan.

☒ Child care resource and referral agencies.

Describe:

Ongoing communication and collaboration with Child Care Aware of Missouri, the Lead Agency's statewide resource, referral and training provider. Collaboration includes the workshop calendar offering a variety of trainings, dissemination of information to families seeking child care, offering referral services and technical assistance to child care providers.

☒ State/Territory agency responsible for public education.

Describe:

The Lead Agency has a Memorandum of Understanding with the Department of Elementary and Secondary Education. The MOU addresses early learning guidelines, before and after school services, inclusion services, and support for professional development. Through the development of the annual MOU the Lead Agency and DESE strategize on how to best address early childhood needs.

☒ State/Territory institutions for higher education, including community colleges.

Describe:

Describe The Lead Agency and the Department of Elementary and Secondary Education MOU addresses collaboration and support with local community colleges to assist with professional development: e.g. Child Development Associates.

☒ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).

Describe:

The Lead Agency participates in monthly meetings with the Department of Health and Senior Services, which includes the Child and Adult Care Food Program, to review concerns related in common to child care providers, strategies for addressing concerns, and ways to improve program integrity.

☒ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention.

Describe:

The Lead Agency participates in quarterly meetings with the Department of Health and Senior Services, which includes the Nurse Health Consultation Program, to review child care provider training needs and parent education related to nutrition and health.

☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.

Describe:

☒ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant.

Describe:

The Department of Health and Senior Services oversees the Maternal and Childhood Home Visitation Program. The Lead Agency serves as a member of the Early Childhood Comprehensive Services committee and participates in the development of the strategic plan and implementation of home visiting services.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

☒ State/Territory agency responsible for public health.

Describe:

The Lead Agency participates in quarterly meetings with the Department of Health and Senior Services, which includes the Nurse Health Consultation Program, to review child care provider training needs and parent education related to nutrition and health.

☒ State/Territory agency responsible for mental health.

Describe:

Through the Coordinating Board for Early Childhood's mental health workgroup, in which the Lead Agency participates, with the goal of developing mental health consultation for child care providers.

☒ State/Territory agency responsible for child welfare.

Describe:

Lead Agency is a part of the child welfare agency. State administrator is a part of the agency's executive team.

☒ State/Territory liaison for military child care programs.

Describe:

Missouri is one of 13 states participating in the DoD Military Child Care Liaison Project. The lead agency has met with the Liaison assigned to Missouri to assist in identifying current state efforts, priorities, and quality initiatives that impact the ability of military families to access high quality of installation child care services in their communities. The lead agency will collaborate with the Liaison to coordinate efforts in the planning and development of priorities and quality initiatives of mutual interest.

☒ State/Territory agency responsible for employment services/workforce development.

Describe:

The Lead Agency has an active pilot project with 10 of the 14 Workforce Development Boards (WDBs) throughout the state. The purpose of the pilot is to demonstrate how applications for child care assistance can be more accessible, streamlined, and expedited when WDB staff is trained in how to take a child care application and the documentation required for the Family Support Division to determine eligibility. The pilot project's goal is to expedite the child care application process for those seeking employment services through the WDBs.

☒ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

The Family Support Division and the Lead Agency regularly collaborate on ensuring policies and procedures related to eligibility do not create barriers for families applying for child care assistance. Workgroup consisting of key staff from the Lead Agency, Family Support Division and Information Technology Services is collaborating to develop system changes to

streamline eligibility for both participants and staff. The goal of the system changes is to eliminate current barriers for participants in applying for services and improving the flow of information between the agency and parents and child care providers.

☒ State/Territory community agencies serving refugee or immigrant families

Describe:

Lead Agency will support ongoing collaboration through participation in quarterly meetings with the resettlement agencies.

☒ Provider groups or associations.

Describe:

The Lead Agency meets with and provides presentations on the child care subsidy programs to the St. Louis Regional Early Childhood Council and other informal groups of child care providers.

☐ Worker organizations.

Describe:

☒ Parent groups or organizations.

Describe:

Held focus groups for parents in the St. Louis Metropolitan area to discuss upcoming changes to the child care subsidy program as the result of the CCDF Reauthorization Act of 2014.

☐ Other.

Describe:

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii)) Combining funds could include blending multiple

funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits

(https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

☐ Yes, If yes, describe at a minimum:

How do you define "combine"

Which funds will you combine

Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)

How are the funds tracked and method of oversight



No.

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level - State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services.

Early Head Start is designed to increase the quality and capacity of childcare for Missouri's birth to age three population living at or below the federal poverty line. Early Head Start provides an early, continuous, intensive, and comprehensive child development program and offers an array of services to the families to include, but not be limited to, home visits, comprehensive health and mental health services, parent education, case management support, and coordination of services. Early Head Start develops and encourages relationships with the families and helps strengthen natural family supports within their communities. There are several sites across the state.

Out of School Time is designed to develop partnerships between families, schools, and communities while providing children with access to safe, healthy environments and enriching learning activities during non-school hours. Out of School Time also develops relationships between the children and consistent adults and provides support to working parents by way of providing child care. Family engagement is a key component to this program and it offers low-

income students in high poverty areas quality extended learning, social, recreational, and personal life skill development.

ParentLink is a WarmLine and Grand Family program designed to target and provide outreach to high risk individuals and child care and early learning programs serving low income and at risk families. ParentLink offers quality parenting information, materials, and other resources such as research-related literature, educational brochures, and lending library items, as well as services such as outreach activities and support groups in an effort to proactively strengthen and support Missouri's families and communities. All services are provided at no cost and the outreach extends across the state.

Educare is a state funded initiative that reaches out to every county in Missouri, and is designed to improve the quality of child care and early learning programs by assisting child care providers and early learning programs with the knowledge of developmentally appropriate practices and the skills to implement comprehensive early childhood programming in order to support children's development and to strengthen the families they work with. Educare offers resources, technical assistance, and various training and support group opportunities at little to no cost to state subsidized child care and early learning programs.

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems

States may use funds to support or establish Child Care Resource and Referral (CCR&R) systems (also see section 7.4). If they do, there are specific requirements for CCR&Rs (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory

- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

Nothing in statute prohibits States from using CCR&R agencies to conduct or provide additional services beyond those required by statute above.

1.7.1 Does the State fund a system of local or regional CCR&R organizations?

☒ Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4.

If yes, the local or regional referral agency is required to do all of the activities listed here.

See also related follow-up questions in Section 7.1 and 7.4. Does the CCR&R system provide all services identified below:

The Lead Agency's department contracts with Child Care Aware of Missouri (CCA of MO) to provide child care resource, referral, and training services, reaching all 114 counties and the City of St. Louis. CCA of MO serves as a community resource for child care and related issues by helping families find and access quality, affordable child care, pre-school, and after-school programs, consumer education, and provides training consultation, coordination and facilitation to child care and early learning program owners, directors, and teachers to improve the quality of their programs. In addition, CCA of MO provides information to business and civic leaders about the value and importance of child care and collaborates and partners with them to make child care safe and enriching for all children and to increase the capacity for child care.

CCA of MO has an online child care search database that allows families to independently search for child care and early learning programs that best suits their family's needs by offering them a variety of child care settings to choose from. CCA of MO also provides verbal or written consumer education information and provides face-to-face services dependent on the families preference. Some of the information provided includes different types of child care options available, a range of child care costs in relation to geographic area, age of child, and child care option sought by the family, health and safety requirements for providers as well as where to locate the licensing regulations and how to review provider files and monitoring inspection results. CCA of MO also provides inclusion support services through the provision of information and referrals as requested and refers families for parenting education, child care assistance,

health insurance assistance, and other benefit programs for low-income families.

CCA of MO also provides and operates an Internet-based training calendar application for training and education that is available for child care providers. CCA of MO maintains data on an on-going basis for all areas of services and provides this to the Lead Agency on a quarterly and annual basis.

☐ No. The State/Territory does not fund a CCR&R system and has no plans to establish.

Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States must include a Statewide Child Care Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.1 Describe the status of State's Statewide Child Care Disaster Plan.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated

into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

☒ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Substantially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Missouri's Child Care Disaster Plan addresses continuing CCDF assistance and child care services after a disaster, provisions for temporary child care, and temporary operating standards for child care after a disaster. Licensed child care providers are required to complete Disaster and Emergency Preparedness training and are required by state regulation to have a plan for preparing for an emergency and responding to a disaster. <https://dss.mo.gov/cd/childcare/pdf/missouri-childcare-disaster-plan.pdf>](#)

Unmet requirement - Identify the requirement(s) to be implemented [child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Promulgate rules for child care providers to complete training and prepare disaster and emergency preparedness plan](#)

Projected start date for each activity: [06/01/2015](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Social Services, Division of Legal Services](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Revise child care subsidy agreements to require licensed exempt and exempt from licensure CCDF providers to complete required trainings and plans.](#)

Projected start date for each activity: [01/02/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Develop policy for monitoring completion of training and planning.](#)

Projected start date for each activity: [01/02/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Modify contracts with Educare providers to incorporate support to registered providers in completing Emergency Preparedness Plans.](#)

Projected start date for each activity: 01/02/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Educare providers](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Modify contract with CCRRT provider to include training on training calendar and provide resource materials on disaster and emergency preparedness planning](#)

Projected start date for each activity: 01/02/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[CCRRT Provider](#)

[2 Promote Family Engagement through Outreach and Consumer Education](#)

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child

care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. 1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
 - a) the availability of child care assistance,
 - b) the quality of child care providers (if available),
 - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
 - d) Individuals with Disabilities Education Act (IDEA) programs and services,
 - e) Research and best practices in child development, and
 - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.
- 2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
 - a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
 - b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
 - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

[2.1 Information about Child Care Financial Assistance Program Availability and Application Process](#)

Lead Agencies must inform parents of eligible children and the general public of the process by

which they can apply for and potentially receive child care services. (658D(b)(1)(A)), 658E(c)(2)(E)(i)(1))

2.1.1 Describe how the State/Territory informs families of availability of services.

a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)

Eligible families are identified through local social service agencies, community resource fairs, outreach agencies and local Workforce Development Boards.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

The Lead Agency's department contracts with Child Care Aware of Missouri for child care resource and referral services. The Lead Agency partners with the Workforce Development Boards across the state to help facilitate applying for child care subsidy. Trainings on the child care application process have been held with community based social service agencies and will continue to be held with community partners to assist participants in applying for child care subsidy. The training sessions provide educational information to social service case managers and social workers on the application process and required verification to process the application. This allows those working directly with families, who may be eligible for child care assistance, to have support during the application process.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?)

Information regarding the child care subsidy program is available on the state's website at : www.dss.mo.gov. Information regarding income guidelines, provider rates and other resources are available online. There are brochures for the traditional child care program and the transitional child care programs.

2.1.2 How can parents apply for services? Check all that apply.

☒ Electronically via online application, mobile app or email.

Provide link <https://dss.mo.gov/cd/childcare/pdf/ccapplication.pdf>

☒ In-person interview or orientation.

Describe agencies where these may occur:

Individuals applying for child care may be required to complete an interview in order to secure additional information or clarify information provided by the applicant. The interview may be by phone or in person with the Family Support Division.

☒ Phone

☒ Mail

☐ At the child care site

☐ At a child care resource and referral agency.

☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations.

Describe:

N/A

☒ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time).

Describe:

Individuals may apply for child care services through the Family Support Division when making application for TANF, SNAP or Medicaid.

☒ Other strategies.

Describe:

The Lead Agency is conducting a pilot project with 10 of the 14 Local Workforce Development Boards (WDB). WDB staff will assist participants with the child care application process within the local WDB office and will forward completed applications and available documentation to Family Support Division Child Care Processing Center through a designated e-mail. This process will streamline and expedite the completion of the child care application process.

2.2 Consumer Education Website

The CCDBG Act of 2014 added a purpose of the child care program "to promote involvement by parents and family members in the development of their children in child care settings." (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the

following information through resource and referral agencies or other means. (658E(c)(2)(E))

2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:

- information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP) for which families may also qualify.
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity), and
- State/Territory policies regarding the social-emotional behavioral health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children, in early childhood programs receiving child care assistance (CCDF).

☐ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

- Information about the availability of the full diversity of child care services that will promote informed child care choices is fully implemented through the Lead Agency's resource, referral and training statewide contract with Child Care Aware of Missouri.
- Information on the availability of child care assistance is available on the Department of Social Services website. To improve access to information on the availability of child care assistance the Lead Agency will be requesting that information be placed on additional public and private websites by 9/30/2016.
- Information regarding Individuals with Disabilities Education Act (IDEA) programs and services is partially implemented. The Department of Elementary and Secondary Education provides information on IDEA at <http://dese.mo.gov/special-education/compliance/general-guidance>. The Lead Agency's website will be updated by 09/30/2016 to include a link to the DESE website.
- Consumer education on research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement is made available through current agreements with the Department of Elementary and Secondary Education (develop and train on Early Learning Guidelines), Educare contractors (provide information to providers on all domains of early childhood development), Opportunities in a Professional Education Network and Child Care Aware of Missouri Department of Social Services (provide links for Missouri's early learning guidelines). ParentLink offers a resource library, an 800 number for parents, providers and general public to make inquiries on all domains of child development. Additional implementation on the Early Learning Guidelines will be addressed in the FFY-17 MOU with Department of Elementary and Secondary Education.

Unmet requirement - Identify the requirement(s) to be implemented [Availability of child care assistance](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will amend MOUs with Department of Health and Senior Services, Department of Elementary and Secondary Education, and contracts with Child Care Aware of Missouri, Missouri Head Start Association, Missouri Head Start State Collaboration Office, ParentLink (parenting information organization) and Educare contractors to place links on their websites and distribute informational materials on other programs for which families may also qualify.

Projected start date for each activity: 01/02/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Department of Health and Senior Services, Department of Elementary and Secondary Education, and contracts with Child Care Aware of Missouri, Missouri Head Start Association, Missouri Head Start State Collaboration Office, and ParentLink](#)

Unmet requirement - Identify the requirement(s) to be implemented [State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children \(which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children \(children from birth to five for purposes of this requirement\)\) in early childhood programs receiving CCDF.\)](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[The Lead Agency, in collaboration with the Early Childhood Interagency Team, will develop policies regarding the social-emotional/behavioral and early childhood mental health of young children including policies on expulsion.](#)

Projected start date for each activity: 03/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with to complete

implementation of this activity

Early Childhood Interagency Team

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Based on policies developed by EC Interagency Team, the Lead Agency will develop informational packets, training, and technical assistance for child care providers.

Projected start date for each activity: 03/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

2.2.2 Describe how the State/Territory makes information available about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency's department contracts for child care resource, referral and training services through Child Care Aware of Missouri (CCA of MO). CCA of MO provides, via phone and on-line search, information and consumer education for individuals of all income levels. Information available allows individuals to choose the best child care options for their child, their work locations/schedules, and their family's needs. CCA of MO ensures that families are well informed about and assisted in finding high quality child care arrangements that meet the needs of the child. CCA of MO printed materials are written at a sixth (6th) to eighth (8th) grade reading level.

CCA of MO provides consumer education information packets to all individuals who call or come into an affiliated office seeking child care information. The packets include information on: indicators of quality child care; range of child care costs; child care options available,

such as, types of facilities, licensed, license exempt, unlicensed, registered and accredited; other family or child care related issues; child care assistance programs; inclusion of children with special needs; MO HealthNet health insurance programs; and the child care subsidy program.

CCA of MO has an online presence via a website and other social media sources.

The Department of Social Services has an internet presence consisting of multiple information pages for each division, including the Lead Agency that provides information on all income support programs (TANF, SNAP, LIHEAP, Medicaid, and Child Care Subsidy), brochures, frequently asked questions and answers, the application/eligibility statement and links to partnering agencies. The home page URL is <http://dss.mo.gov/cd/childcare>.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Written materials on the child care subsidy program and other income support programs are available through the Lead Agency and the Family Support Division. The Family Support Division (FSD) Income Maintenance Unit, responsible for intake and eligibility, has resource centers in each county and the City of St. Louis offering face to face customer service and program information, including written materials on all programs including child care subsidy. FSD also operates a customer information call center.

c) Describe who you partner with to make information about the full diversity of child care choices available

The Lead Agency partners with Child Care Aware of Missouri, the Family Support Division, The Departments of Elementary and Secondary Education, Health and Senior Services and Mental Health, the Workforce Development Board, and local social service agencies.

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public

Missouri does not have a quality rating system. Information through the Child Care Resource and Referral agency has information on programs that are accredited.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Child Care Resource and Referral agency has information available to consumers and the general public through written materials and web site.

c) Describe who you partner with to make information about child care quality available

The Lead Agency's department contracts with Child Care Aware of Missouri to provide information to consumers and the general public.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs.

For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

a) Temporary Assistance for Needy Families (TANF)

Family Support Division (FSD) provides information through an intake process in person, by mail, through the FSD website, and via a call center. Every county has an FSD resource center and/or customer service center with front line staff. The Child Care Aware of Missouri contract requires families making inquiries about child care to be referred to FSD for other benefit programs for which the family may be eligible.

b) Head Start and Early Head Start Programs

The Lead Agency works closely in partnership with the Missouri Head Start State Collaboration Office and the Missouri Head Start Association. The Family Support Division provides a monthly listing of subsidy eligible children to Head Start providers. The Children's Division local offices (per judicial circuits) have Memorandums of Understanding with local Head Start providers outlining collaboration and partnership.

c) Low Income Home Energy Assistance Program (LIHEAP)

LIHEAP is administered by the Family Support Division through contracts with local community action agencies. Information on the program is available through the contracted agencies and on the Family Support Division website.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

Family Support Division (FSD) provides information through an intake process: in person, by mail, the FSD web site or via a call center. Every county has an FSD resource center and/or customer service center with front line staff. The Child Care Aware of Missouri contract requires families making inquiries about child care to be referred to FSD for other benefit programs for which the family may be eligible.

e) Women, Infants, and Children Program (WIC)

WIC certification and nutrition services are offered by 111 contracted local agencies, operating at approximately 242 clinics throughout the state. Oversight is by Missouri Department of Health and Senior Services with information provided by TEL-LINK, the Missouri Department of Health and Senior Services toll-free information and referral line for maternal and child health care.

f) Child and Adult Care Food Program(CACFP)

CACFP is administered by the Community Food and Nutrition Assistance in the Missouri Department of Health and Senior Services. Information is provided in publications, on the web, and various outreach opportunities and information provided by TEL-LINK, the Missouri Department of Health and Senior Services toll-free information and referral line for maternal and child health.

g) Medicaid

Family Support Division (FSD) provides information through an intake process: in person, by mail, through the FSD website and via a call center. Every county has an FSD resource center and/or customer service center with front line staff. The Lead Agency's department contract with Child Care Aware of Missouri requires that families making inquiries on child care to be referred to FSD for other benefit programs for which the family may be eligible.

h) Children's Health Insurance Program (CHIP)

Family Support Division (FSD) provides information through an intake process: in person, by mail, through the FSD website and via a call center. Every county has an FSD resource center and/or customer service center with front line staff. The Lead Agency's department contract with Child Care Aware of Missouri requires that families making inquiries on child care to be referred to FSD for other benefit programs for which the family may be eligible.

i) Individuals with Disabilities Education Act (IDEA)

Department of Elementary and Secondary Education (DESE) - Office of Special Education implements services under IDEA. DESE provides information on IDEA and special education services on its website.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)

N/A

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

The Missouri Early Childhood Comprehensive Systems provides information on home visiting programs through the Department of Health and Senior Services website.

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs.

For example, does the State/Territory provide information to providers through CCR&Routreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

Every county has an FSD resource center and/or customer service center with front line workers and has a statewide call center. The Lead Agency's department contract with Child Care Aware of Missouri requires families inquiring about child care to be referred to FSD for other benefit programs for which the family may be eligible.

b) Head Start and Early Head Start Programs

The Lead Agency works closely in partnership with the Missouri Head Start State Collaboration Office and the Missouri Head Start Association. The Family Support Division provides a monthly listing of subsidy eligible children to Head Start providers. The Children's Division local offices (per judicial circuits) have Memorandums of Understanding with local Head Start providers outlining collaboration and partnership.

c) Low Income Home Energy Assistance Program (LIHEAP)

LIHEAP is administered by the Family Support Division through contracts with local community action agencies. Information on the program is available through the contracted agencies and on the Family Support Division website.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

Every county has an FSD resource center and/or customer service center with front line workers and has a statewide call center. The Lead Agency's department contract with Child Care Aware of Missouri requires families inquiring about child care to be referred to FSD for other benefit programs for which the family may be eligible.

e) Women, Infants, and Children Program (WIC)

WIC certification and nutrition services are offered by 111 contracted local agencies, operating at approximately 242 clinics throughout the state. Oversight is by Missouri Department of Health and Senior Services with information provided by TEL-LINK, the Missouri Department of Health and Senior Services toll-free information and referral line for maternal and child health care.

f) Child and Adult Care Food Program(CACFP)

CACFP is administered by the Community Food and Nutrition Assistance Program in the Missouri Department of Health and Senior Services. Information is provided in publications, on the web, and various outreach opportunities and information provided by TEL-LINK, the Missouri Department of Health and Senior Services toll-free information and referral line for maternal and child health.

g) Medicaid

Every county has an FSD resource center and/or customer service center with front line workers and has a statewide call center. The Lead Agency's department contract with Child Care Aware of Missouri requires families inquiring about child care to be referred to FSD for other benefit programs for which the family may be eligible.

h) Children's Health Insurance Program (CHIP)

Every county has an FSD resource center and/or customer service center with front line workers and has a statewide call center. The Lead Agency's department contract with Child Care Aware of Missouri requires families inquiring about child care to be referred to FSD for other benefit programs for which the family may be eligible.

i) Individuals with Disabilities Education Act (IDEA)

Department of Elementary and Secondary Education (DESE) - Office of Special Education implements services under IDEA. DESE provides information on IDEA and special education services on its website.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K)

N/A

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

MO Early Childhood Comprehensive Systems provides information on home visiting programs through the Department of Health and Senior Services website.

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about

research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))

a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency contracts with ParentLink: A WarmLine that provides quality parenting information, materials, and other resources, such as research-related literature, educational brochures, and lending library items, and services, such as outreach activities and support groups to proactively strengthen and support Missouri's families and communities. The website is <http://education.missouri.edu/outreach/parentlink/>

The Educare programs are based within Universities or Community Partnerships and DSS contracts with the programs to provide technical assistance and training to our registered family home child care providers. The program provides free on-site training for providers and may fund providers to attend other trainings. The program also provides training to unlicensed child care providers.

The Child Care Health and Safety Consultation program, funded through a memorandum of understanding with the Department of Health and Senior Services, supports local public health agencies' health professionals to provide consultation and/or education to all child care providers related to health issues in child care settings, and health promotion activities to children in child care.

Child Care Aware of Missouri, contracted as the resource and referral agency, provides parenting resources, provider resources, training, and general information based on research and best practices.

Missouri Afterschool Network (MASN) provides training and technical assistance to afterschool programs including resources, research-based information about the social and emotional development, cognitive, and physical health and development of school-age youth, and meaningful parent and family engagement for school-age programs.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Free information (including books, videotapes, DVDs, and curricula) about parenting is available through the ParentLink Loan Library. The materials cover topics like general

parenting concerns, developmental stages, teen pregnancy, substance abuse, discipline techniques, toilet training, children with special needs, and grandparents raising grandchildren. ParentLink has an online library catalog. Requests for materials are made through the toll free number. WarmLine professionals have, at a minimum, a Masters Degree in human service fields such as Human Development and Family Studies, Social Work, and Education and Counseling Psychology and can visit with people who need assistance in thinking through solutions to parenting concerns or questions. ParentLink can also be reached by a toll free number, email, text message, social media, online, or in person. ParentLink also facilitates a "Grandparents Raising Grandchildren Support Group" once a month.

Educare contractors provide free on-site training and comprehensive childhood programming in every Missouri county to support children's development and strengthen families using a specified research-based curriculum or resource. Educare contractors also facilitate support groups for providers.

The Child Care Health and Safety Consultation program's health professionals provide consultation and education to providers on more than 18 topics relating to health issues and health promotion activities.

Child Care Aware® of Missouri provides face-to-face and online training in a wide variety of topics to child care and early learning program owners, directors, and teachers to improve the quality of their programs.

Collaboration with Missouri Afterschool Network which provides face-to-face training in a wide variety of youth development topics to afterschool program directors and staff to improve the quality of their programs.

c) Describe who you partner with to make information about research and best practices in child development available

ParentLink is a grant-funded educational organization of the University of Missouri's College of Education. Their services are free to all adults in Missouri. Educare is a state-funded initiative that provides resources, technical assistance and training opportunities, at free or reduced costs, to child care providers in every county with an emphasis on family home providers.

The Child Care Health and Safety Consultation program is a collaborative project between the Missouri Department of Health and Senior Services and the Local Public Health Agencies throughout Missouri to provide child care health consultation services to child care providers. It is supported in part by special grants from the U.S. Department for Health and Human Services, Child Care and Maternal and Child Health Bureaus. Local Health

Departments provide most child care consultation, training, and education resources at no cost.

Child Care Aware® of Missouri is the contracted child care resource and referral agency that coordinates the activities and services of its Network Member Agencies across all 115 counties in Missouri.

2.2.7 Describe how information on the State/Territory's policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to parents, providers and the general public. (658E(c)(2)(E)(i)(VII))

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to 1) parents of eligible children, 2) providers and 3) the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents

The Lead Agency makes information on positive behavioral intervention support models to parents through contracts with ParentLink and Child Care Aware of Missouri.

ii. Providers

The Lead Agency makes information on positive behavioral intervention support models to providers through contracts with ParentLink, Child Care Aware of Missouri, Educare providers, and Child Care Health and Safety Consultation program. In addition, MASN provides information on positive behavioral intervention support to school-age providers.

iii. General public

The Lead Agency makes information on positive behavioral intervention support models to the general public through contracts with ParentLink, Child Care Aware of Missouri, Educare providers, and Child Care Health and Safety Consultation program.

b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available

Parents, providers and general public may access information on positive behavioral intervention support models through ParentLink, Child Care Aware of Missouri, Educare

providers, and Child Care Health and Safety Consultation program.

c) Does the State have a written policy regarding preventing expulsion of:

Preschool children (from birth to five) in early childhood programs receiving child care assistance?

☐ Yes.

If yes, If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link

[N/A](#)

☒ No.

School-age children from programs receiving child care assistance?

☐ Yes.

If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link

[N/A](#)

☒ No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

Describe the status of the State/Territory's procedures for providing information on and

referring families to existing developmental screening services.

☐ Fully implemented and meeting all Federal requirements outlined above - by March 1, 2016.

List the Lead Agency policy citation(s) and:

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened

b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

☒ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Not yet started](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented [Establish procedures to provide information to families and providers \(1\) Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act \(42 U.S.C. 1396 et seq.\) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act \(20 U.S.C. 1419, 1431 et seq.\);](#)

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Establish workgroup with representatives from Family Support Division, MO HealthNet, Department of Elementary and Secondary Education, Department of Health and Senior Services, Department of Mental Health, Child Care Aware of Missouri, Educare providers and ParentLink to identify existing procedures and develop additional procedures to provide information to families and providers on developmental screening services through EPSDT and IDEA.

Projected start date for each activity: 04/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Departments of Social Services, Elementary and Secondary Education, Mental Health and Health and Senior Services; Child Care Aware of Missouri, Educare Providers and ParentLink.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Draft written and electronic materials for distribution to workgroups members' websites, local offices and local community based organizations on accessing developmental screenings and services through EPSDT and IDEA.](#)

Projected start date for each activity: 06/30/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Department of Social Services and Department of Elementary and Secondary Education.](#)

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

a) How does the State/Territory define substantiated parental complaint

A substantiated complaint is any complaint in which the child care provider is in violation of a state or federal regulation.

b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

Substantiated complaints are maintained in the provider's registration record for 10 years.

c) How does the State/Territory make substantiated parental complaints available to the public on request

The public may request in writing information on substantiated complaints to the Lead Agency. The Lead Agency will follow up in writing to the requester with information on the complaint, reason complaint was substantiated and final action taken; which may include revocation of provider's registration or corrective action taken by the provider. Once the electronic system is finalized (projected 09/30/2016) all information will be available through the Lead Agency and the Department of Health and Senior Services child care website.

d) Describe how the State/Territory defines and maintains complaints from others about providers

Complaints received from others are defined and maintained in the same manner as complaints received from parents.

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☐ Application in other languages (application document, brochures, provider notices)
- ☐ Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☐ Website in non-English languages
- ☐ Lead Agency accepts applications at local community-based locations
- ☐ Bilingual caseworkers or translators available

- ☐ Bilingual outreach workers
- ☒ Partnerships with community-based organizations
- ☒ Other

Lead Agency contracts with interpreter services.

☐ None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages

Lead Agency has the ability to have interpretation services in all primary and secondary languages.

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities

The Lead Agency allows for a disability as a need for child care if a single parent household or a two parent household, if the non-disabled parent is employed or in a training/education program. The Family Support Division is responsible for programs and benefits for individuals with disabilities.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

The State/Territory must make public certain information about the results of such monitoring on

a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

2.3.1 Describe the status of State/Territory's consumer education website.

☐ Fully implemented and meeting all Federal requirements outlined above - by March 1, 2016.

Provide the link to the website:

and describe how the consumer education website meets the requirements to:

- a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe
- b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe
- c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe
- d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe
- e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

☒ Not implemented. If not implemented, the State/Territory must provide a State/Territory-

specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Substantially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Provider specific information regarding inspections and the results for licensed child care providers may be accessed at Department of Health and Senior Services website: <http://health.mo.gov/safety/childcare/index.php>. The plan is to add inspection and monitoring results for licensed exempt providers and providers not required to be licensed, who are receiving CCDF, to the web site. There will be a link from the Lead Agency's website to the Department of Health and Senior Services website. The Department of Health and Senior Services website; <http://health.mo.gov/safety/childcare/index.php>, provides information on health and safety requirements for licensed and religious in compliance license exempt providers. Information for other license exempt providers and providers not required to be licensed, who are receiving CCDF will be added to the Lead Agency's website with a link on the Department of Health and Senior Services website.](#)

Unmet requirement - Identify the requirement(s) to be implemented [Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Aggregated information on the number of deaths, serious injuries and incidences of substantiated child abuse in child care settings will be placed on the Lead Agency's website and link to the information will be placed on the Department of Health and Senior Services and CCRRT websites.

Projected start date for each activity: 06/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with to complete implementation of this activity

[Department of Social Services](#)

[Department of Health and Senior Services](#)

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents' options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements - and the opportunity for children to form trusting relationships with teachers - are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase-out of assistance. The definition of an eligible child includes that a family's assets may not exceed \$1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required. There is nothing in statute to prohibit States from

establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

In order to be eligible for services, children must (1) be under the age of 13, (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size, and whose family assets do not exceed \$1,000,000 (as certified by a member of such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves children from 0 (weeks/months/years) to 12 years 11 months years (through age 12).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3))

☒ Yes, and the upper age is 18 years or up to, and including the month they graduate high school if graduation occurs prior to the 19th birthday (may not equal or exceed age 19). (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity: A child receiving Supplemental Security Income (SSI); A child receiving services through the Missouri Department of Mental Health; A child with a physical or mental disability or delay verified in writing by a medical professional or mental health professional

☐ No

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))

☒ Yes and the upper age is 13 to 18 years or up to, and including the month they graduate high school if graduation occurs prior to the 19th birthday and are physically or mentally incapacitated (may not equal or exceed age 19) (may not equal or exceed age

19)

☐ No.

3.1.2 How does the Lead Agency define the following eligibility terms?

a) residing with -

Residing in the same physical residence of a parent or parents in case of joint custody maintaining care and custody. In joint custody cases, each household is considered separately. Authorization of the child(ren) to a provider shall be made based on the time child care is needed by the applying household.

b) in loco parentis -

The child's guardian or caretaker relative or any other person with whom a child lives who has assumed responsibility for the day-to-day care and custody of the child.

3.1.3 Eligibility Criteria Based on Reason for Care

a) How does the Lead Agency define "working, attending job training and education" for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

* working:

Paid employment that does not include payment of income in kind.

* attending job training

Attending job training geared toward a specific type of employment.

* attending education

Participation and enrollment in general education development (GED) or adult education and literacy (AEL); participation and enrollment for coursework in English as a Second Language (ESL); participation and enrollment in elementary, junior high, or high school; post-secondary education with the intent to earn an associate degree or bachelor degree.

b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?

☒ Yes.

☐ No.

If no, describe additional requirements

The Lead Agency allows parents to qualify for CCDF assistance on the basis of education and training participation alone.

c) Does the Lead Agency provide child care to children in protective services?

☒ Yes. If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a brief description below.

1) Definition of protective services -

Children who are receiving preventative services or treatment for child abuse or neglect as an intact family and children who are in the custody of the State for placement in alternative care, i.e. foster care.

2) Does the Lead Agency waive the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis? (658E(c)(5))

☐ Yes.

☒ No.

Note - If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in the protective services definition above.

☐ No.

3.1.4 Eligibility Criteria Based on Family Income

a) How does the Lead Agency define "income" for the purposes of eligibility at the point of determination?

* Definition of income -

The average monthly amount of total income received by all members of the family unit before deductions, to include, but not limited to: wages, adjusted gross income from self-employment, adjusted gross income from farm income, social security, dividends, interest, etc.

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns

(c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI.

☐ **Note** - If the income eligibility limits are not statewide, check here

Describe how many jurisdictions set their own income eligibility limits

N/A

Fill in the chart based on the most populous area of the state.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	3116.00	2648.60	1366.00	44%	2219.00	72%
2	4075.00	3463.75	1842.00	46%	2870.00	71%
3	5034.00	4278.90	2318.00	46%	3612.00	72%
4	5993.00	5094.05	2795.00	47%	4354.00	73%
5	6951.00	5908.35	3271.00	47%	5096.00	74%

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal [poverty guidelines](http://aspe.hhs.gov/poverty/index.cfm) are available at <http://aspe.hhs.gov/poverty/index.cfm>.

c) SMI Source and year <https://www.federalregister.gov/articles/2014/07/21/2014-17063/notice-of-liheap-state-median-income-estimates-for-ffy-2015>

d) These eligibility limits in column (c) became or will become effective on: [04/01/2016](#)

e) Provide the link to the income eligibility limits <https://dss.mo.gov/cd/childcare/pdf/child-care-income-guidelines.pdf> <http://dss.mo.gov/cd/childcare/transcc.htm>

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first applying for assistance and those already receiving assistance, sometimes called an "exit threshold") or by granting a sustained period of continued assistance to the family before termination.

Describe the status of the State/Territory's policy regarding graduated phase-out of assistance.

☒ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out

Active families reporting a change in income at redetermination may qualify for Transitional Child Care . If the adjusted gross income is in excess of 138% of poverty, but does not exceed 165% of poverty, the family will qualify for Transitional Child Care Level 1. Transitional Child Care Level 1 allows the family to remain eligible for 75% of the child care benefit to be paid. If the adjusted gross income is in excess of 165% of poverty, but does not exceed 190% of poverty, the family will qualify for Transitional Child Care Level 2. Transitional Child Care Level 2 allows the family to remain eligible for 50% of the child care benefit to be paid. If the adjusted gross income is in excess 190% of poverty but does not exceed 215% of poverty, the family will qualify for Transitional Child Care Level 3. Transitional Child Care Level 3 allows the family to remain eligible for 25% of the child care benefit to be paid. Families eligible for Transitional Child Care remain eligible until the next redetermination as long as income does not exceed 85% of the state median income for the family size. If income does not exceed the maximum income for the Transitional Level of Care, the family will remain eligible until income exceeds 215% for their family size.

☐ Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than

September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory's (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II))

Note - this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory's policy related to the fluctuation in earnings requirement.

☒ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

If the household has been receiving irregular or sporadic earned or unearned income over a period of one (1) year or more, divide the income received over the last twelve (12) months by twelve (12) to arrive at a monthly amount.

If the household has been receiving irregular or sporadic earned or unearned income for a period of less than one (1) year, average the amount of income during this period.

If the household's current income shows a substantial increase or decrease, a representative period of the irregular or sporadic income should be used to determine the average monthly amount. Arrive at a mutually agreed upon prediction of the current income and expenses with the Eligibility Unit.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

N/A

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information.

Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

☒ Applicant identity.

Describe:

Missouri does not require verification of identity for Child Care Subsidy.

☒ Applicant's relationship to the child.

Describe:

Applicants must be a parent, specified relative, or a legal guardian. Documents used to verify relationship include: birth certificates, birth information available through an interface with the state's vital statistics system, court orders, or other relationship verification that may include hospital records, family Bible documentation, or as a last resort, a third party

verification. The household's statement of relationship is accepted when other sources of verification are not available.

☒ Child's information for determining eligibility (e.g., identity, age, etc.).

Describe:

A child's information is verified through an interface with the state's vital statistics system, if the child was born in Missouri. If a child was not born in Missouri, the child's information can be verified with a birth certificate from the child's state of birth. Other methods of verification are listed above, in ways to verify relationship of an applicant to a child.

☒ Work.

Describe:

Employment may be verified by pay check stubs, a letter on company letterhead from the employer, a work schedule, system verification through The Work Number, system verification through an interface with Employment Security, or a telephone call to the employer.

☒ Job Training or Educational Program.

Describe:

Participation in job training or an educational program may be verified by letter on training program/educational program letterhead, training program schedule, school schedule, student income verification form, receipts for fees paid to educational programs, or a telephone call to someone with the training program or educational program.

☒ Family Income.

Describe:

Income may be verified by pay check stubs, a letter on company letterhead from employer with wage and hours working information, system verification through the Work Number, system verification through an interface with the Social Security Administration, or system verification through an interface with Employment Security.

☒ Household composition.

Describe:

Household composition is verified by applicant attestation.

☒ Applicant Residence.

Describe:

Residence is verified by applicant attestation.

☒ Other.

Describe:

Need for care is verified to determine the number of units to authorize for child care. The work schedule may be verified by pay check stub if the pay check stub contains enough information to determine hours/time of day worked by applicant, a letter on company/job training/educational program letterhead with hours/time participating in eligible need component, training program schedule, school schedule, work schedule, or a telephone call to someone with the company/job training program/educational program to verify need.

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

3.1.8 Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

☒ Time limit for making eligibility determinations.

Describe length of time :

Missouri follows a 15 day processing timeframe for Child Care Subsidy eligibility determinations.

☒ Track and monitor the eligibility determination process

☐ Other.

Describe:

N/A

☐ None

3.1.9 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.

NOTE: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions:

State/Territory TANF Agency [Department of Social Services, Family Support Division](#)

b) Provide the following definitions established by the TANF agency.

"appropriate child care":

[Child care that is consistently available; child care that is available during the participant's hours of employment, education, training, and/or work activity; child care that addresses the specialized needs of the child.](#)

"reasonable distance":

[To determine whether child care is within reasonable distance, consider the following factors:](#)

- 1. When the participant has no independent transportation, but can be expected to use public transportation: if the child care is available at the appropriate time for the participant's schedule of work or work participation activity, the public transportation is not cost prohibitive, and if the time involved in getting to public transportation, getting to child care, and then to work is reasonable in relationship to the participant's actual hours of work or work participation activity.
- 2. When the participant has an independent means of transportation, the transportation must include the following: the vehicle or other transportation must be reliable, the participant must be able to afford the transportation costs (including the cost of maintaining and insuring the reliability of the transportation), the commuting time from the participant's home to the child care provider to the work activity is no more than one hour each way.

"unsuitability of informal child care":

Families are not required to accept child care with providers who are not licensed or license exempt and registered.

"affordable child care arrangements":

Child care is considered affordable when the cost of care does not exceed ten percent (10%) of a family's gross income less medical insurance premiums. This ten percent (10%) includes any sliding fee a family may be required to pay, but does not include federal, state, or local child care subsidy.

c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

☒ In writing

☒ Verbally

☐ Other.

Describe:

N/A

☒ List the citation to this TANF policy.

List:

0285.005.00 ALLOWABLE REASONS FOR NON-PARTICIPATION - TA recipients may have good cause for not participating in work activities, and/or not responding to the call-in letter. If the recipient responds at any point prior to or on the date of the sanction appointment, s/he must be evaluated to determine if the criteria for an exemption, temporary exclusion, or another good cause reason(s) is met.

3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed \$1,000,000. A check-off on the application is sufficient

☒ Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed \$1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

a. Provide definition of "Children with special needs": A child is classified as having special needs when they are receiving Social Security Income (SSI) based on their own disability; are receiving services through the Department of Mental health, with a verified diagnosis of having special needs; have a verified diagnoses of a physical or mental disability that causes a significant delay in a child's cognitive, behavioral, emotional, or social development in comparison with normal development standards; is a protective services child receiving services for the treatment or prevention of child abuse and/or neglect from the Children's Division, or is a child under court-order supervision.

and describe how services are prioritized:

Children classified as having special needs continue to be a priority for the agency. Child care rates for children classified as having special needs are paid at the rate of the child's "functional age" and child care providers providing care to children classified with having special needs are paid a 25% rate differential.

b. Provide definition of "Families with very low incomes": Families with very low incomes are defined as families with income less than 15% of SMI

and describe how services are prioritized:

Families with "very low incomes" continue to be a priority for the agency. Families with "very low incomes" are only required to pay a \$1.00 sliding fee per year and are automatically eligible for child care subsidy, with a valid need.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act) Families with "very low incomes" are only required to pay a \$1.00 sliding fee per year and

are automatically eligible for child care subsidy, with a valid need. Families participating in Missouri Work Assistance (MWA) are considered eligible for child care subsidy, with the expectation that with MWA participation they will soon have a child care need to be authorized. This ensures families have the support to participate in work activities and eliminate delays due to insufficient funds to pay for child care. If families participating in MWA become employed at a wage that is greater than 166% of SMI, they are eligible to be considered for Transitional Child Care Subsidy.

3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children's learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will make it significantly easier for these vulnerable families to access child care services. This language is consistent with current requirements established through CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)(I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

Describe the status of the State/Territory's procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

☐ Fully implemented and meeting all Federal requirements outlined above by March 1,

2016. Describe the following:

- a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements
- b. Procedures to conduct outreach to homeless families to improve access to child care services
- c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

☒ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Discussions have been held with the Department of Health and Senior Services, Section for Child Care Regulation \(SCCR\) to allow for a grace period to comply with immunization and other health and safety information in order to expedite enrollment for foster children and homeless children. SCCR has agreed to allow CCDF child care providers to request a waiver to allow for the enrollment of a foster child or homeless child without immunization or health records for up to five \(5\) days](#)

Unmet requirement - Identify the requirement(s) to be implemented [1\) allow homeless children to receive CCDF assistance after an initial eligibility determination but before](#)

providing required documentation (including documentation related to immunizations);

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Update child care subsidy policy to include Homelessness as a need for child care. Homeless families, able to verify that the parents(s) are working with a community based service agency for the homeless, will be considered as having met the need for child care.

Projected start date for each activity: 01/02/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Coordinate with Child Care Aware of Missouri to add trainings to provider Workshop Calendar on issue of homelessness and working with homeless families and children.

Projected start date for each activity: 03/01/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Child Care Aware of MO and community based providers of services for homeless families.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Amend Educare provider contracts to add requirement to provide information, training and technical assistance on working with homeless families and children.](#)

Projected start date for each activity: [03/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Educare providers](#)

Unmet requirement - Identify the requirement(s) to be implemented [3\) conduct specific outreach to homeless families. \(658E\(c\)\(3\)\)](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Develop and implement an outreach plan to improve access to child care services for homeless families.](#)

Projected start date for each activity: [03/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [A grace period that allows homeless children and children in foster care \(if served by the Lead Agency\) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating

agencies, etc.)

Amend Memorandum of Understanding with Department of Health and Senior Services, Section for Child Care Regulation to include a requirement to provide a five day grace period for homeless and foster children immunization and health information.

Projected start date for each activity: 03/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity **Lead Agency**

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Health and Senior Services, Section for Child Care Regulation

3.3 Protection for Working Parents

3.3.1 Twelve Month Eligibility

The CCDBG Act of 2014 establishes a 12-month eligibility period for CCDF families. States are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for not less than 12 months before the State redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) &(ii))

Note that this change means a State may not terminate CCDF assistance during the 12 month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State may not terminate assistance prior to the end of the 12 month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. For example, if a working parent is temporarily absent from employment due to extended medical leave, changes in seasonal work schedule, or a parent enrolled in training or educational program is temporarily not attending class between

semesters, the state should not terminate assistance.

Describe the status of the State's establishment of a 12-month eligibility re-determination period for CCDF families.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination
List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

☒ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Families receiving child care subsidy are currently eligible for a period of 12 months. However, authorizations for child care are not entered at time of eligibility for a full 12 months. Policy needs to be revised to delete reporting requirements during the 12 month eligibility period and draft policy on not terminating eligibility based on changes in income or temporary changes in employment, training, education or homelessness.](#)

Unmet requirement - Identify the requirement(s) to be implemented [A minimum 12-month eligibility and redetermination period for CCDF families.](#)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating

agencies, etc.)

[Revise policy on reporting requirements for families receiving child care subsidy.](#)

Projected start date for each activity: [03/01/2016](#)

Projected end date for each activity: [07/31/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Family Support Division](#)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Make changes to electronic system to allow for authorizations to be entered for up to 12 months.](#)

Projected start date for each activity: [12/01/2016](#)

Projected end date for each activity: [06/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Office of Administration - ITSD/FAMIS](#)

[3.3.2 State and Territory option to terminate assistance prior to 12 months](#)

The CCDBG Act of 2014 provides States and Territories the option - but does not require them - to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible.

(658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period - the State/Territory may not exercise the option to terminate assistance based on a parent's non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and re-determination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period.

Does the State/Territory terminate assistance prior to 12 months due to a parent's non-temporary loss of work or cessation of attendance at a job training or education program?

☒ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.

List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

The Lead Agency will implement policy terminating child care assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program. Participants will be given until the end of the third month, following date of loss of employment or stops attending a job training or education program.

☐ No, the State/Territory does not allow this option.

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting

documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

☒ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

Notices of redetermination are mailed to families forty-five (45) days prior to the end of eligibility. Families are able to complete the redetermination form and return by mail with required documentation. Families are not required to come in to a Family Support Division location to complete a redetermination.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size.

☐ Note - If the sliding fee scale is not statewide, check here
and describe how many jurisdictions set their own sliding fee scale

N/A

Fill in the chart based on the most populous area of the State.

Family Size	(a) Lowest "Entry" Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum Highest "Entry" Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	0.00	\$1.00/Year		\$1354.00	\$115/max for 23FT units	8%
2	0.00	\$1.00/Year		\$1833.00	\$115/max for 23FT units	6%
3	0.00	\$1.00/Year		\$2310.00	\$115/max for 23FT units	5%

Family Size	(a) Lowest "Entry" Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum Highest "Entry" Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
4	0.00	\$1.00/Year		\$2789.00	\$115/max for 23FT units	4%
5	0.00	\$1.00/Year		\$3268.00	\$115/max for 23FT units	3.5%

a) What is the effective date of the sliding fee scale(s)? 08/01/2015

b) Provide the link to the sliding fee scale <http://dss.mo.gov/cd/childcare/pdf/child-care-income-guidelines.pdf>

**3.4.2 How will the family's contribution be calculated and to whom will it be applied?
Check all that the Lead Agency has chosen to use.**

- ☒ Fee as dollar amount and
 - ☒ Fee is per child with the same fee for each child
 - ☐ Fee is per child and discounted fee for two or more children
 - ☐ Fee is per child up to a maximum per family
 - ☐ No additional fee charged after certain number of children
 - ☐ Fee is per family
- ☐ Fee as percent of income and
 - ☐ Fee is per child with the same percentage applied for each child
 - ☐ Fee is per child and discounted percentage applied for two or more children
 - ☐ Fee is per child up to a maximum per family
 - ☐ No additional percentage applied charged after certain number of children
 - ☐ Fee is per family
 - ☐ Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

N/A

☒ Other.

Describe:

The sliding fee is waived for children categorized as having special needs.

3.4.3 Will the Lead Agency use other factors in addition to income and family size to determine each family's copayment? (658E(c)(3)(B))

☒ Yes, and describe those additional factors using the checkboxes below.

☒ Number of hours the child is in care

☐ Lower copayments for higher quality of care as defined by the State/Territory

☐ Other.

Describe other factors.

N/A

☐ No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size.

Will the Lead Agency waive family contributions/co-payments?

☐ Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size.

The poverty level used by the Lead Agency for a family size of 3 is \$

☒ No, the Lead Agency does not waive family contributions/co-payments

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable?

Check all that apply:

☐ Limits the maximum co-payment per family.

Describe:

N/A

☐ Limits combined amount of copayment for all children to a percentage of family income.

List the percentage of the copayment limit.

Describe:

N/A

☒ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5.

Describe:

Active families with an increase in income at time of redetermination may qualify for Transitional Child Care . If the adjusted gross income exceeds 139% of poverty, but does not exceed 165% of poverty, the family may qualify for Transitional Child Care Level 1. Transitional Child Care Level 1 allows the family to remain eligible for 75% of the child care benefit to be paid. If the adjusted gross income exceeds 166% of poverty, but does not exceed 190% of poverty, the family will qualify for Transitional Child Care Level 2. Transitional Child Care Level 2 allows the family to remain eligible for 50% of the child care benefit to be paid. If the adjusted gross income exceeds 191% of poverty, but does not exceed 215% of poverty, the family will qualify for Transitional Child Care Level 3. Transitional Child Care Level 3 allows the family to remain eligible for 25% of the child care benefit to be paid.

☐ Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying.

Describe:

N/A

☐ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider.

Describe:

N/A

☐ Other.

Describe:

N/A

4 Ensure Equal Access to High Quality Child Care for Low-Income Children

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: 1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory's payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child

care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

Parents are advised at the time of application that they may use a licensed/contracted child care provider or a licensed exempt/registered provider. The difference in the types of providers is explained to the parents.

4.1.2 Describe how the parent is informed of the option to choose from a variety of child care categories - such as private, not-for-profit, faith-based providers (if using a certificate), centers, family child care homes, or in-home providers (658E(c)(2)(A)(i), 658P(2), 658Q))

- ☐ Certificate form provides information about the choice of providers, including high quality providers
- ☐ Certificate is not linked to a specific provider so parents can choose provider of choice
- ☒ Consumer education materials on choosing child care
- ☒ Referral to child care resource and referral agencies
- ☐ Co-located resource and referral in eligibility offices
- ☒ Verbal communication at the time of application
- ☐ Community outreach, workshops or other in-person activities
- ☐ Other.

Describe

N/A

4.1.3 Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1) **Note:** Do not check "yes" if every provider

is simply required to sign an agreement in order to be paid in the certificate program.

☒ Yes. If yes, **describe**

the type(s) of child care services available through grants or contracts

Early Head Start and Out of School Time programs.

the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.)

Lead Agency contracts with 9 community based service providers throughout Missouri. Out of School Time (OST) is available through contracts with ARCHS (St. Louis County and St. Louis City) and LINC (Jackson County) in urban areas with high levels of poverty.

the process for accessing grants or contracts

Out of School Time contracts are awarded to Community Partnerships and Early Head Start contracts are awarded through competitive bid.

the range of providers available through grants or contracts

Out of School Time serves urban areas. Early Head Start contractors sub-contracts with various entities in order to reach the maximum amount of families.

how rates for contracted slots are set for grants and contracts

Contractors set rates for slots with local providers.

how the State/Territory determines which entities to contract with for increasing supply and/or improving quality

Through competitive bid process.

if contracts are offered statewide and/or locally:

Out of School Time is awarded regionally based on the needs of urban areas. Early Head Start is offered statewide through competitive bid process.

☐ No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

☒ Increase the supply of specific types of care with grants or contracts for:

☐ Programs to serve children with disabilities

☒ Programs to serve infants and toddlers

☒ Programs to serve school-age children

☐ Programs to serve children needing non-traditional hour care

- ☐ Programs to serve homeless children
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds
- ☒ Programs that serve specific geographic areas
 - ☒ Urban
 - ☐ Rural
- ☐ Other.

Describe:

N/A

- ☒ Improve the quality of child care programs with grants or contracts for:
 - ☒ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
 - ☐ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
 - ☐ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
 - ☒ Programs to serve children with disabilities or special needs
 - ☒ Programs to serve infants and toddlers
 - ☒ Programs to serve school-age children
 - ☒ Programs to serve children needing non-traditional hour care
 - ☐ Programs to serve homeless children
 - ☐ Programs to serve children in underserved areas
 - ☐ Programs that serve children with diverse linguistic or cultural backgrounds
 - ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
 - ☐ Other.

Describe:

N/A

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds.

(658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access

Describe the policies and procedures for unlimited access

Child Care Provider Agreements and Child Care Provider Registration Applications and Agreements both have a clause that the provider must agree to allow parents unlimited access to their children whenever the children are in the care of the provider.

4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. Will the Lead Agency limit the use of in-home care in any way?

☒ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.

☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

Describe:

N/A

☒ Restricted based on provider meeting a minimum age requirement

Describe:

Registered in home providers must be 18 years old or older.

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)

Describe:

N/A

☐ Restricted to care by relatives

Describe:

N/A

☐ Restricted to care for children with special needs or medical condition

Describe:

N/A

☒ Restricted to in-home providers that meet some basic health and safety requirements

Describe:

All registered child care providers providing care within the child's home must meet minimum health and safety requirements through the completion of trainings based on the health and safety requirements; i.e. Safe Sleep practices, emergency preparedness, CPR and First Aid and others as defined by the Lead Agency.

☒ Other

Describe:

In home care providers can only provide care to children living in the home where care is provided.

☐ No.

4.2 Assessing Market Rates and Child Care Costs

The new law revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval. (see <http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq>).

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including by posting the

results on the Internet.

The State must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the State must take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

☒ MRS

☐ Alternative Methodology.

Describe:

N/A

☐ Both.

Describe:

N/A

☐ Other.

Describe:

N/A

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology.

Describe:

Coordinating Board for Early Childhood (SAC) informed of MRS and assistance in notifying providers of survey was requested.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable.

To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

Describe:

Surveys were made available online to 3,323 providers. Providers were notified by multiple email messages as well as a message on the online invoicing system. A total of 121 surveys were completed. All surveys returned were able to be used with only one outlier needing clarification. Each geographic area of the state was represented in the MRS. The survey was broken down by each county as well as grouped into metropolitan statistical areas. The survey reflects rates for infants, pre-school and school age children for full time, half time and part time child care. If any outliers were detected they were contacted directly by DSS staff to confirm the data. Due to low response rate, the Lead Agency is considering alternative options for conducting future surveys in order to increase the number of responses.

4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:

a) Geographic area (e.g., statewide or local markets):

Survey is broken down by each county as well as grouped into metropolitan statistical areas.

b) Type of provider:

Licensed child care providers were surveyed for this survey.

c) Age of child:

Survey reflected rates for infant, pre-school and school age children.

d) Describe any other key variations examined by the market rate survey, such as quality level

Survey reflected rates for full time, half time and part time child care.

4.2.5 Describe the process used by the State to make the results of the market rate survey widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)

12/20/2014

b) Date report containing results were made widely available, no less than 30 days after the completion of the report 01/15/2015

c) How the report containing results was made widely available and provide the link where the report is posted if available

a) <http://dss.mo.gov/re/pdf/oecmmr/2014-child-care-market-rate-survey.pdf>

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children).

☐ Note - If the payment rates are not set by the State/Territory, check here

Describe how many jurisdictions set their own payment rates

N/A

a) Infant (6 months), full-time licensed center care in most populous geographic region

Rate \$ 29.20 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)

Percentile: 46%

b) Infant (6 months), full-time licensed FCC care in most populous geographic region

Rate \$ 18.25 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)

Percentile: 49%

c) Toddler (18 months), full-time licensed center care in most populous geographic region

Rate \$ 29.20 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 46%

d) Toddler (18 months), full-time licensed FCC care in most populous geographic region

Rate \$ 18.25 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 49%

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 17.05 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 38%

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 14.48 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 43%

g) School-age child (6 years), full-time licensed center care in the most populous geographic region

Rate \$ 16.71 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50%

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 13.37 per 5-10 hours unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 71%

i) Describe the calculation/definition of full-time care:

Full time care is 5 hours to 10 hours per day.

j) Provide the effective date of the payment rates : 07/01/2015

k) Provide the link to the payment rates : <https://dssapp.dss.mo.gov/ccrate/>

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3)

needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care.

In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☒ Tiered rate/rate add-on for non-traditional hours.

Describe:

A 15% rate differential for evening and weekend care. Care beginning or ending during the timeframe of 7:01pm to 5:59am and Saturday 6:00am through Sunday 7:00pm. The rate differential was not based on the MRS. All rates are determined based on appropriation.

☒ Tiered rate/rate add-on for children with special needs as defined by the State/Territory.

Describe:

25% rate differential for special needs children. The rate differential was not based on the MRS. All rates are determined based on appropriation.

☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).

Describe:

N/A

☒ Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.

Describe:

20% rate differential for programs that are accredited through the state recognized accrediting bodies. The rate differential was not based on the MRS. All rates are determined based on appropriation.

☐ Tiered rate/rate add-on for programs serving homeless children.

Describe:

N/A

☒ Other tiered rate/rate add-on beyond the base rate.

Describe:

30% Disproportionate Share rate differential for programs providing care to 50% or more subsidy children in the total enrollment. Since in 2003 no additional providers have been added due to funding. However, providers that were eligible at the time were grandfathered in and several programs still receive this differential. The rate differential was not based on the MRS. All rates are determined based on appropriation.

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology

Describe:

MRS results are used to make recommendations for rate increases to the Department. Rates are then determined based on appropriations.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014.

For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

Describe:

A 20% rate differential for programs that are accredited through the state recognized accrediting bodies.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access - such as percentile that rates cover or proportion of costs covered)? Check all that apply and describe.

☐ Payment rates are set at the 75th percentile or higher of the most recent survey.

Describe:

N/A

☒ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.

☐ Rates based on data on the cost to the provider of providing care meeting certain standards

Describe:

N/A

☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile.

Describe:

N/A

☐ Data on the proportion of children receiving subsidy being served by high-quality providers.

Describe:

N/A

☐ Data on where children are being served showing access to the full range of providers. .

Describe:

N/A

☐ Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF.

Describe:

N/A

☐ Feedback from parents, including parent survey or parent complaints.

Describe:

N/A

☐ Other.

Describe:

N/A

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

☒ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016.

Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

The Lead Agency offers rate differentials to providers serving more than 50% children receiving child care subsidy, special needs children, and accredited facilities. In addition, parents may choose from licensed, licensed-exempt or providers not required to be licensed which offers different rate levels. There are 295 child care providers receiving a rate differential for being accredited impactng 10,740 children. There are 2,920 child care providers receiving a rate differential for providing care to 12,326 children with special needs. Disproportionate share rate differential is provided to 179 child care providers impactng 12,330 children.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an

Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory's payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory - so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

4.5.1 Describe the status of State/Territory's payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory

☒ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. Check all that apply and describe.

The Lead Agency

- ☐ Pays prospectively prior to the delivery of services.

Describe:

N/A

- ☒ Pays within no more than 21 days of billing for services.

Describe:

Licensed, contracted child care providers are required to bill online and registered child care providers have the option of billing online, within 60 days of the end of the service month. Payment is generated within 5 business days from the date the provider enters attendance into the online invoicing system. Registered child care providers who choose to bill by paper invoice are provided with the invoice prior to the end of the service month and able to submit the last day of the service month, by mail. The Child Care Payment Unit pays all paper invoices within 2 business days of receipt. Payment is issued 5 business days after the invoice is entered by the Child Care Payment Unit.

- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.

Describe including the State/Territory's definition of occasional absences

N/A

- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe

Specify percent and describe

N/A

- ☒ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month.

Specify the number of absence days allowed and paid for and describe

Providers may bill for up to 5 absences and/or holidays for children that are authorized for 20 or more units of care during the month. Providers may bill for up to 3 absences and/or holidays for children that are authorized for 3-19 units of care per month. Providers may not bill for absences or holidays unless a child is in care for at least one unit of care in the service month. Absences are defined as when a facility is open for business and a child that is normally in care is absent. Holidays are defined as any date

the facility is closed (for traditional holidays like Christmas or Memorial Day or non-traditional days, like snow days) for business on a day they would normally be open. Child care providers are able to bill for up to eleven (11) holidays in a state fiscal year.

- ☒ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

Describe:

Payment is made by units of care. A full time unit of care is 5-10 hours of care, a half time unit of care is 3 hours to 4 hours 59 minutes of care, and a part time unit of care is 30 minutes to 2 hours 59 minutes of care.

- ☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)

Describe:

N/A

- ☒ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

Providers are notified by a system generated change notice the day after a change is entered into the system. The change notice is mailed.

- ☒ Has a timely appeal and resolution process for payment inaccuracies and disputes.

Describe:

Providers who report a payment discrepancies within 60 days of the service month, may submit a Child Care Provider Payment Resolution Request to have the payment discrepancy reviewed. Payment Resolution Requests are reviewed by the Child Care Payment Unit within 30 days of the date of receipt.

- ☐ Other.

Describe:

N/A

- ☒ For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory.

With a number of set days for absences and holidays providers are able to budget a set number of days per child. Registration fees, deposits, supplies and field trips have not been a part of the subsidy program in the past and there are no plans to add this type of payment to the subsidy program.

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

- ☒ Policy on length of time for making payments.

Describe length of time:

Providers are required to bill within 60 days of the service month and the Child Care Payment Unit is required to pay paper invoices within 2 business days of receipt.

- ☐ Track and monitor the payment process

Describe:

N/A

- ☒ Use of electronic tools (e.g., automated billing, direct deposit, etc.)

Describe:

Licensed, contracted child care providers are required to bill online and registered child care providers have the option of billing online, within 60 days of the end of the service month. Payment is generated within 5 business days from the date the provider enters attendance into the online invoicing system. Licensed, contracted child care providers are required to accept payment by direct deposit and registered child care providers are strongly encouraged to accept payment by direct deposit.

- ☐ Other.

Describe:

N/A

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

- ☒ Yes.

Describe data sources

Child Care Aware of Missouri maintains data on the supply and demand for child care services in Missouri. Reports are made available to the Lead Agency upon request.

☐ No.

If no, how does the State/Territory determine most critical supply needs?

N/A

4.6.2 Describe what method(s) is used to increase supply and improve quality for:

a) Infants and toddlers (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☒ Other.

Describe

Base rate includes payment differential.

b) Children with disabilities (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☒ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other.

Describe

N/A

c) Children who receive care during non-traditional hours (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)

- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☒ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other.

Describe

N/A

d) Homeless children (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other.

Describe

N/A

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q))

Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

- ☒ Fully implemented and meeting all Federal requirements outlined above.

Describe

The Lead Agency uses a competitive bid process for the Early Head Start program that is available statewide for entities to submit proposals. Missouri's Early Head Start

program focuses on the implementation of federal Head Start requirements, early developmental screenings and education and parent engagement. Families must be under 185% of the federal poverty level. Providers of the services are required to serve at least 10% special needs children. Educare services are offered in all areas of the state, including areas of high concentration of poverty, to work with child care providers in improving the quality of child care services.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5 Establish Standards and Monitoring Processes to Ensure the Health

and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don't care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State is required to certify it has in effect licensing requirements applicable to all child care services provided within the State (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State.

(658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

Center-based: Center-based child care provider is defined as a provider licensed or

otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent's work. A child day care center or center, whether known or incorporated under another title or name, is a child care program conducted in a location other than the provider's permanent residence, or separate from the provider's living quarters, where care is provided for children not related to the child care provider for any part of the twenty-four (24)-hour day.

Group Home Child Care: Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day, per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent's work. A group day care home where care is given by a person licensed as a group day care home provider for eleven (11), but not more than twenty (20), children not related to the child care provider for any part of the twenty-four (24)-hour day.

Family Child Care: Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent's work. A family day care where care is given by a person licensed as a day care home provider for no more than ten (10) children not related to the provider for any part of the twenty-four (24)-hour day.

5.1.2 Does your State/Territory exempt any child care providers from its licensing requirements?

☒ Yes.

Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

License exempt providers may include: schools, child care facilities operated by a religious organization, individuals caring for four or less unrelated children, Military bases, summer camps, out of state licensed and license exempt facilities. All license exempt providers must meet minimum health and safety requirements.

☐ No.

5.1.3 Describe the status of the State/Territory's development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

☒ Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

a) Licensed Center-Based Care

1. Infant

- State/Territory age definition:

0 to 12 months

- Ratio:

1:4

- Group Size:

8

2. Toddler

- State/Territory age definition:

12 -24 months

- Ratio:

1:4

- Group Size:

8

3. Preschool:

- State/Territory age definition:

2 -5 years of age

- Ratio:

1:8 for a group comprised solely of 2 year olds; or 1:10 for mixed age groups.

- Group Size:

16 for a group comprised solely of 2 year olds. Group size for 3 to 5 year olds is 30..

4. School-Age

- State/Territory age definition:

5 years up to 13 years of age and attending school

- Ratio:

1:16

- Group Size:

Group sizes for school age children is 48.

5. If any of the responses above are different for exempt child care centers, describe:

There are no set ratios for licensed exempt centers.

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.

Mixed Age Groups Two Years (2) and Up. Groups composed of mixed ages of children two (2) years of age and older shall have no less than one (1) adult to ten (10) children with a maximum of four (4) two (2)-year olds. When there are more than four (4) two (2)-year olds in a mixed group, the staff/child ratio shall be no less than one (1) adult to eight (8) children.

b) Licensed Group Child Care Homes:

1. Infant

- State/Territory age definition:

0 to 12 months

- Ratio:

1:4

- Group Size:

8

2. Toddler

- State/Territory age definition:

12 -24 months

- Ratio:

1:8

- Group Size:

16

3. Preschool:

- State/Territory age definition:

2 -5 years of age

- Ratio:

1:8 for a group comprised solely of 2 year olds; or 1:10 for mixed age groups.

- Group Size:

16 for groups comprised solely of 2 year olds. Group size for 3 to 5 year olds is 30.

4. School-Age

- State/Territory age definition:

5 years of age up to 13 years of age who are in school.

- Ratio:

1:16

- Group Size:

Group size for school age children is 48.

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

Provider for 11 but not more than 20 children not related to the child care provider.

6. If any of the responses above are different for exempt group child care homes,

describe

There are no license exempt group homes



N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

No ratios

Describe the group size:

10

Describe the threshold for when licensing is required:

Maximum of 5 children who are not related to the provider within the 3rd degree by blood, marriage or adoption.

Describe the maximum number of children that are allowed in the home at any one time:

10

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

No

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

The number of unrelated children under the age of two will affect the total number of children allowed. In addition, licensing rules allow for a provider to care for an additional third of the licensed capacity for no more than 2 hours per day to accommodate school age children.

2. If any of the responses above are different for exempt family child care home providers, describe

Exempt family child care homes may not have more than four unrelated children.

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

None

Describe group size:

4 or less unrelated and no cap on number of related within the third degree.

Describe the threshold for when licensing is required:

When there are more than four unrelated children in care.

Describe maximum number of children that are allowed in the home at any one time:

Maximum of 5 children who are not related to the provider within the 3rd degree by blood, marriage or adoption

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

No

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

N/A

5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment, and background screening on file.

and assistant teacher qualifications:

Same as Lead

2. Toddler lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment and background screening on file.

and assistant teacher qualifications:

Same as lead.

3. Preschool lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment, and background screening on file.

and assistant teacher qualifications:

Same as lead.

4. School-Age lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment, and background screening on file.

and assistant teacher qualifications:

Same as lead.

5. Director qualifications:

Up to 20 Children - Thirty (30) college semester hours, with six (6) of the thirty (30) hours in child-related courses; or twelve (12) months' experience with six (6) college semester hours in child-related courses; or a CDA credential. 21-60 Children - Sixty (60) college semester hours. Twelve (12) of the hours must be in child-related courses; or twenty-four (24) months' experience and twelve (12) college semester hours in child-related courses. 61-99 Children - Ninety (90) college semester hours. Eighteen (18) of the ninety (90) hours must be in child-related courses; or thirty-six (36) months' experience and eighteen (18) college semester hours in child-related courses. 100 or More Children One hundred twenty (120) college semester hours. Twenty-four (24) of the one hundred twenty (120) hours must be in child-related courses. Six (6) of the twenty-four (24) college semester hours may include courses in business or management; or four (4) years' experience and twenty-four (24) college semester hours in child related courses. Six (6) of the twenty-four (24) college semester hours may include courses in business or management.

b) Licensed Group Child Care Homes:

1. Infant lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment , and background screening on file.

and assistant qualifications:

Same as lead.

2. Toddler lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment , and background screening on file.

and assistant qualifications:

Same as lead.

3. Preschool lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment , and background screening on file.

and assistant qualifications:

Same as lead.

4. School-Age lead teacher

Shall be at least 18 years old, have a medical examination report to include a TB risk assessment , and background screening on file.

and assistant qualifications:

Same as lead.



N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications

Shall be eighteen (18) years of age or older, have knowledge of the needs of children, and be sensitive to the capabilities, interest, and problems of children in care. The provider shall also have a medical examination report, which includes a TB risk assessment, and a background screening on file.

d) Other eligible providers qualifications:

Must be 18 years or age or older.

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed

below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.

(658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State certifies that it has health and safety requirements for individuals (providers) receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016.

Provide a citation and a link if available

☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than

September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Substantially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Health and safety requirements for CCDF providers, who are not licensed, have been defined and draft regulations have been submitted for approval and promulgation. Requirements to be registered for non-licensed CCDF child care providers will be revised to include health and safety requirements as defined by federal statute. Compliance with requirements will be confirmed through on-site monitorings. Licensed providers are currently required to meet health and safety requirements as defined in the federal statute.](#)

Unmet requirement - Identify the requirement(s) to be implemented [Prevention and control of infectious diseases \(including immunization\)](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Define child care provider requirements and supporting training and technical assistance for the prevention and control of infectious diseases.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [First aid and](#)

cardiopulmonary resuscitation (CPR) certification

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Require that child care providers and staff have completed certification in first aid and cardiopulmonary resuscitation (CPR).

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [Prevention of sudden infant death syndrome and use of safe sleeping practices](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define child care provider requirements and supporting training and technical assistance for the prevention of sudden infant death syndrome and use of safe sleeping practices.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [Administration of medication, consistent with standards for parental consent](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define child care provider requirements and supporting training and technical assistance on the safe administration of medication Requirements to include written parental consent for the administration of medications.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Prevention of and response to emergencies due to food and allergic reactions

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define child care provider requirements and supporting training and technical assistance for the prevention of and response to emergencies due to food and allergic reactions.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define building and physical premises requirements that ensure environment is safe for the care of children; to include, but not limited to, compliance with local ordinances, codes and regulations, required fire safety equipment, and requirements for protective measures from hazards for physical space and outdoor play areas.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [Prevention of shaken baby syndrome and abusive head trauma](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define child care provider requirements and supporting training and technical assistance for the prevention of shaken baby syndrome and abusive head trauma.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event \(such as violence at a child care facility\), within the](#)

meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define child care provider requirements and supporting training and technical assistance for emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)).

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [Handling and storage of hazardous materials and the appropriate disposal of bio contaminants](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define child care provider requirements and supporting training and technical assistance for the handling and storage of hazardous materials and the appropriate disposal of bio contaminants.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [Precautions in transporting children \(if applicable\)](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Define child care provider requirements and supporting training and technical assistance for the precautions in transporting children.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2016](#)


Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

 No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Statutory authority to promulgate rules requiring training for CCDF providers passed the state legislature in 2014 with delayed implementation until 10/2016. Health and safety requirements for CCDF providers have been defined and draft regulations have been submitted for approval and promulgation. Majority of the pre-service and orientation trainings are available on the CCRR&T Workshop Calendar. Electronic system to track completion of training is in place. Licensed child care providers are required to complete 12 hours of training per calendar year. Training topics are not defined by the Department of Health. Licensed child care providers are required by state statute to complete training in Safe Sleep practices and by regulation emergency preparedness training.](#)

Unmet requirement - Identify the requirement(s) to be implemented [pre-service \(prior to initial service\) or orientation \(period from when service started\) appropriate to the provider setting that address each of the requirements relating to the required topic areas](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Promulgate rules that have been drafted to define trainings that are required as pre-service and those that are required within six months of contracting to receive subsidy payments.](#)

Projected start date for each activity: 12/01/2016

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Revise child care subsidy contract with child care providers to define training requirements; pre-service, orientation and annual training. Child care providers under contract on 09/30/2016, will be required to have all Lead Agency defined trainings completed by 06/30/2017 in order to continue to contract for subsidy payments.](#)

Projected start date for each activity: 03/01/2016

Projected end date for each activity: 06/30/2017

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented [ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the required topic areas](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Promulgate rules requiring CCDF providers complete annual training as defined by the Lead Agency.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Revise child care provider contracts for subsidy to include a requirement for the completion of annual training as specified by the Lead Agency.

Projected start date for each activity: 03/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

☐ Nutrition (including age appropriate feeding).

Describe:

N/A

☐ Access to physical activity.

Describe:

N/A

☐ Screen time.

Describe:

N/A

- ☐ Caring for children with special needs.

Describe:

N/A

- ☒ Recognition and reporting of child abuse and neglect.

Describe:

Mandatory child abuse and neglect reporting.

- ☐ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.

Describe:

N/A

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety requirements.

Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

- ☐ Yes, all relatives are exempt from all health and safety training requirements.
If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.

N/A

- ☐ Yes, some relatives are exempt from health and safety training requirements.
If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

N/A

- ☒ No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory shall have in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements.

(658E(c)(2)(J))

☒ Yes.

The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation

<http://health.mo.gov/safety/childcare/lawsregs.php>

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

☒ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

<https://oa.mo.gov/personnel/classification-specifications/1000> A Bachelor's degree from an accredited college or university with a minimum of 15 earned credit hours in one or a combination of the following: Elementary or Early Childhood Education, Sociology, Psychology, Child Development, Social Work, Nursing, or a closely related field. Upon employment inspectors are trained in how to access and utilize interpreter services. The degrees listed would include education in the area of child development.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan

for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

b) Inspections for Licensed CCDF Providers - It will require licensing inspectors to perform inspections, with not less than one precicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

☒ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding

inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits

[Missouri Code of State Regulations 30-62.042](#)

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

c) Inspections for License-Exempt CCDF Providers (except those serving relatives) -

It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

☐ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:

☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016) [10/01/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Lead Agency has statutory authority to conduct unscheduled on-site monitoring of child care providers prior to receiving state or federal funds and annually thereafter. State regulations to conduct initial and annual on-site unannounced site visits, health and safety requirements for license-exempt and registered providers and appeal process for denial or revocation have been drafted and submitted for approval to be promulgated. The policy and procedures to fulfill the requirements for license-exempt and registered child care providers and the processes for implementation are being drafted for implementation.](#)

Unmet requirement - Identify the requirement(s) to be implemented [policies and practices that require licensing inspectors \(or qualified monitors designated by the lead agency\) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider \(unless the provider is described in section \(658P\(6\)\(B\)\)\)](#).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Draft health and safety requirements for licensed-exempt and registered child care providers; policies and procedures for conducting on-site unannounced initial and annual site inspections; and an appeal processes for license exempt and registered providers who are denied or revoked to receive child care subsidy.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

d) **Ratio of Licensing Inspectors**) - It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))

☒ Yes.

The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors:

[It is the policy of the Department of Health and Senior Services to set ratio of licensing inspectors to the number of facilities based on appropriations for personnel services. Approximately 80 facilities per Licensing Specialist.](#)

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

e) **Child Abuse and Neglect Reporting** - That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

☒ Yes.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s):

[Revised Statutes of Missouri 210.115](#)

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if

applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from inspection requirements.

Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

☐ Yes, all relatives are exempt from all inspection requirements.

If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

N/A

☐ Yes, some relatives are exempt from inspection requirements.

If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

N/A

☒ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories must have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as other adults in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.

Fees for background checks - Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency - The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.

Appeals process - The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

Privacy considerations - Lead Agency may not publicly release the results of individual background checks.

5.3.1 Describe the status of the State/Territory's requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

☐ Fully implemented and meeting all Federal requirements outlined above.

List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

☒ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2017) [09/30/2017](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

[Child Care providers serving four or less unrelated children receiving child care subsidy are required to register with the Family Care Safety Registry and submit fingerprints to the Missouri Highway Patrol for state and national criminal background screenings. All persons, over the age of 17, living in the provider's home are required to register with the Family Care Safety Registry. The Family Care Safety Registry provides background screenings for child abuse and neglect, sex offender registry, Division of Aging's employee disqualification list, the Department of Mental Health's employee disqualification registry, foster parent licensure denials, revocations and involuntary suspensions, child-care facility license denials, revocations and suspensions, residential living facility and nursing home license denials, revocations, suspensions and probationary status. The provider is responsible for the cost of](#)

fingerprinting background checks and registering with the Family Care Safety Registry. The criminal information from the fingerprint checks are sent to the Lead Agency through a secure electronic system from the Missouri State Highway Patrol. The Lead Agency limits the access to the electronic system to only those staff required to review results to determine if a provider should be registered. Results from the Family Care Safety Registry are provided electronically from the Department of Health and Senior Services. The information received is limited to those staff required to review results to determine if a provider should be registered. Providers serving four or less unrelated children who are denied registration to receive subsidy or whose registration is revoked due to results of the criminal background check or Family Care Safety Registry may request an appeal through the Administrative Hearings Unit in the Department of Social Services, Division of Legal Services. Licensed providers and their employees and volunteers are required to undergo a Missouri child abuse and neglect screening and a Missouri criminal history record check; the use of the Family Care Safety Registry is not mandated. Child abuse and neglect screening and criminal history check are required at initial license application, within 10 days of employment, and every two years. No out of state screenings or criminal background checks are required.

Unmet requirement - Identify the requirement(s) to be implemented. Requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Establish requirements for background checks as defined by federal statute through state statute for all child care providers.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Health and Senior Services

Unmet requirement - Identify the requirement(s) to be implemented. [Ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Update Lead Agency and Department of Health and Senior Services web sites and printed information packets with policies and procedures for conducting criminal background checks.](#)

Projected start date for each activity: [10/01/2016](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [Not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Include in information published on background check policies and procedures that information received as a result of the checks are not publicly released.](#)

Projected start date for each activity: [10/01/2016](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Establish through state statute that any staff member of a licensed, licensed exempt, or registered provider and any provider receiving CCDF are required to undergo backgrounds checks as required by federal statute.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [Includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Establish requirements through state statute that licensed, licensed exempt or registered providers or providers receiving CCDF are required to undergo background screenings every five years.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years;](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Establish requirements through state statute requiring a search of State criminal and sex offender registries in each State where the staff member has resided over the past 5 years.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years,](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Establish requirements through state statute to conduct a search of state child abuse and neglect registries in the State where the staff member has resided over the past 5 years.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [National Crime Information Center \(run by the FBI\)](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Establish requirements through state statute for licensed, licensed exempt, or providers receiving CCDF to conduct National Crime Information Center, using Next Generation Identification, prior to employment and every five years thereafter.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2017](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

[Department of Health and Senior Services](#)

Unmet requirement - Identify the requirement(s) to be implemented. [National Sex Offender Registry.](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Establish requirements through state statute to conduct checks of the National Sex Offender Registry for licensed, licensed exempt, registered providers or providers receiving CCDF.](#)

Projected start date for each activity: [12/01/2015](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Department of Health and Senior Services

Unmet requirement - Identify the requirement(s) to be implemented. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Define in state statute that child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Health and Senior Services

Unmet requirement - Identify the requirement(s) to be implemented. Conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Establish through state regulations that background checks for child care providers and staff are required to be completed within 45 days.

Projected start date for each activity: 12/01/2015

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity Lead Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Missouri State Highway Patrol

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks.

Describe:

Child Care providers serving four or less unrelated children are provided with instructions and forms for having criminal background checks and Family Care Safety Registry (FCSR) screenings conducted. The providers are able to complete the registration for criminal background checks and FCSR on line. Once the provider has fingerprints taken and submitted by the third party vendor, results are received by the Lead Agency in approximately 10 working days. FCSR results are provided electronically to the Lead Agency in approximately five working days. The criminal information from the fingerprint checks are sent to the Lead Agency through a secure electronic system from the Missouri State Highway Patrol. The Lead Agency limits the access to the electronic system to only those staff required to review results to determine if a provider should be registered. Results from the Family Care Safety Registry are provided electronically from the Department of Health and Senior Services. The information received is limited to those staff required to review results to determine if a provider should be registered. Providers serving four or less unrelated children who are denied registration to receive subsidy or whose registration is

revoked due to results of the criminal background check or Family Care Safety Registry may request an appeal through the Administrative Hearings Unit in the Department of Social Services, Division of Legal Services.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including which agency/entity is responsible for working with other states

Describe:

Other states may have providers register with Missouri's Family Care Safety Registry to receive results on child abuse and neglect, sex offenders registry, division of aging's employee disqualification list, the Department of Mental Health's employee disqualification registry, foster parent licensure denials, revocations and involuntary suspensions, child-care facility license denials, revocations and suspensions; residential living facility and nursing home license denials, revocations, suspensions and probationary status. Information on the FCSR and a link to the website will be placed on the Lead Agency's website.

5.3.4 Does the State have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

☐ Yes.

Describe:

N/A

☒ No.

5.3.5 Does the Lead Agency disqualify child care staff members based on their conviction for other crimes not specifically listed above?

☐ Yes.

Describe:

N/A

☒ No.

5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as

grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from background checks?

☐ Yes, all relatives are exempt from all background check requirements.

☐ Yes, some relatives are exempt from the background check requirements. If the State /Territory exempts some relatives from background check requirements, describe which relatives are exempt. from which requirements (some or all).

Describe.

☒ No, relatives are not exempt from background checks.

5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable.

Lead Agencies can report that no fees are charged if applicable:

Describe.

Missouri State Highway Patrol sets the fees for processing background checks to cover administrative and personnel costs to conduct the checks.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

Describe.

Current background screening policies are provided in written form to child care providers serving four or less unrelated children and the Department of Health and Senior Services, Section for Child Care Regulation posts requirement on their website.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes.

List types of crime included in the aggregated data:

N/A



No.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a "career ladder" that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children's development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to

this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State's training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the

child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.)

c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

☒ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.1.2 Describe how the State provides ongoing training and professional development, provides for a progression of professional development (such as allows an individual to build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements) reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce:

☒ State/Territory professional standards and competencies.

Describe.

The Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri) is a framework that defines the standards for early childhood and youth development professionals. Child care providers in licensed child care facilities are required to complete 12 clock hours of training approved by the Department of Health and Senior Services between January 1 and December 31 each year.

☒ Career ladder or lattice.

Describe.

The Early Childhood and School Age Education Matrix maintained by the OPEN Initiative at <https://www.openinitiative.org/Resources.html> is used to informally assess staff education levels and provides child care professionals a foundation for planning their professional development progression.

☒ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.

Describe.

The Lead Agency maintains a Memorandum of Understanding with the Department of Elementary and Secondary Education for the Child Development Associate Systems grant, with articulation agreements for institutions and grantees negotiated individually, that allows child care providers to begin the professionalization process within their career field by achieving the first level of certification.

☒ Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.

Describe.

Department of Health and Senior Services, Section for Child Care Regulation reviews all trainings proposed to meet training requirements prior to posting on the CCRRT Workshop Calendar. Purpose of the review is to ensure that trainings meet the set core competencies.

☒ Workforce data, including recruitment, retention, registries or other documentation, and compensation information.

Describe.

The Lead Agency's department contracts with the Opportunities in a Professional Education Network (OPEN) Initiative <https://www.openinitiative.org/> to maintain the Missouri Professional Development Registry to track child care clock training hours, education levels, work experience, First Aid and CPR certification, and other professional development standards for child care professionals that enroll in the Registry; those who enroll can access and update their personal information and monitor their professional development data and progression using a MOPD ID number via a secure website called the Toolbox.

☒ Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.

Describe.

The Lead Agency is a participating member of the state's Coordinating Board for Early Childhood (<http://dss.mo.gov/cbec/index.htm>)

☐ Continuing education unit trainings and credit-bearing professional development.

Describe.

N/A

☒ State-approved trainings.

Describe.

The Lead Agency , as a result of the passage of the law, will begin requiring training for child care providers registered to receive payment for providing care to children receiving child care assistance. It has identified a series of pre-service and core training that will be available on the Missouri Workshop Calendar, maintained through the Lead Agency's contract with Child Care Aware of Missouri. Through its Memorandum of Agreement with the Department of Health and Senior Services, the Lead Agency already assures that multiple levels of state-approved training aligned with the Core Competencies are available via the Missouri Workshop Calendar for access by child care providers statewide to advance their professional development.

☒ Inclusion in state and/or regional workforce and economic development plans.

Describe.

The Lead Agency is working with local Workforce Development Boards to train employees to assist in processing child care subsidy applications and identify a child care provider through the state's resource and referral agency. The Lead Agency is also educating the Workforce Development Boards on the process for becoming a registered subsidy provider in order to increase the availability of child care providers.

☐ Other.

Describe.

N/A

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC

Describe.

The Lead Agency serves on the Coordinating Board for Early Childhood and participates in the Early Childhood and Education Workgroup. The workgroup meets regularly to draft recommendations for development of training and professional development as well as how to support and retain the state's child care workforce. The Lead Agency also serves on the Missouri Afterschool Network, which is a statewide network which addresses training and professional development of the afterschool workforce.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

Describe.

The diversity of the Lead Agency's services requires different training and professional development requirements for individual programs, depending on the service being provided.

The Lead Agency's Educare contract requires that all educators working with child care programs receiving child care assistance obtain a minimum of 12 clock hours of training in early childhood education or related fields during each 12-month contract period, and may use funding provided through the contract to pay for the training, which may include training in the three curricula (Supporting Care Providers through Personal Visits and/or Supporting Infant/Toddler Care Providers; Emotional Beginnings; Heartland Family Child Care Handbook) the state has approved to be used in this program.

The Lead Agency has contracts in the metropolitan areas of St. Louis and Kansas City with the state-mandated Community Partnerships for out-of-school time child care services in approximately 130 locations licensed for child care. Child care staff at these locations are required by contract to participate in on-going development and training in youth development or related fields based on each contractor's professional development plan that outlines the education and specialized training necessary to meet the obligations and objectives of the out-of-school-time funding and that is consistent with the Core Competencies for Early Childhood and Youth Professionals.

The Memorandum of Understanding (MOU) the Lead Agency has with the Department of Elementary and Secondary Education (DESE) requires that DESE offer educational opportunities throughout its 10 regions statewide that focus on developmentally- and age-appropriate practices for children being served with funding from the Lead Agency. This MOU also provides funding to DESE to offer grants to Missouri career/technical schools and post-secondary educational institutions to provide Child Development Associate credentialing programs to child care providers or those interested in working in the child care

field.

The Lead Agency's partner, the Department of Health and Senior Service's Section for Child Care Regulations, requires that nursery schools not operated by religious organizations and licensed child care facilities obtain at least 12 clock hours of approved child care-related training during each year of employment in health, safety, nutrition, guidance and discipline, appropriate activities and learning experiences for children, positive communication and interaction with parents, planning and setting up an appropriate environment for children, professional and administrative practices, or other child-related area.

The Lead Agency is in the process of establishing rules requiring pre-service and core training requirements and additional professional development requirements for child care providers registered with the state to receive payment for providing care to children receiving child care assistance. The basic pre-service training will consist of first aid and cardiopulmonary resuscitation training, child care subsidy orientation training, preventing sudden infant death syndrome and safe sleep training (if serving infants under one year of age), preventing shaken baby syndrome and abusive head trauma, and child abuse and neglect reporting. More advanced training for these registered providers will include infectious disease prevention and control, hand-washing and universal health precautions, medication and parental consent, sanitary food handling, prevention and response to food allergy emergencies, building and physical premises safety, emergency and disaster response, handling and storage of hazardous materials, protection for hazards that can cause bodily harm, the physical, social, and emotional development of children, and transportation of children. Most of these training components would meet the requirements of the Department of Health and Senior Services' Section for Child Care Regulation if the registered child care provider decided to become licensed.

6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)

Describe.

1.1.1 There are no recognized Indian tribes or tribal organizations in Missouri.

6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

Describe.

1.1.1The Missouri Department of Health and Senior Services' Section for Child Care Regulation has long had rules in place requiring specific training requirements for licensed and some license exempt child care providers. Approved training is offered statewide via the Lead Agency's resource, referral, and training agency Child Care Aware of Missouri's Workshop Calendar at <http://www.moworkshopcalendar.org/>. In state fiscal year 2015, there were a total of 137 different training sessions offered for a total of 381 training hours. Some of these training sessions are face-to-face and some are offered via an Internet-based webinar format. The Missouri Training Calendar also provides links to on-line on-demand training from various prestigious providers as Pennsylvania State University Extension, the Child Care Education institute, the Child Care Lounge, the CypherWorx MOSAC2 Learning Lab, the Early Childhood Academy, FEMA, Healthy Child America, the University of Missouri Extension, the National Alliance Strengthening Families, the Thompson Center for Autism, and many more. Links are also provided for national and regional conferences and associations training, as well as first aid and CPR training statewide. Child care providers also have the option of requesting training on specific topics if it is not being offered at a regularly scheduled time. Regularly scheduled topics include infant/toddler and youth development curricula covering topics ranging from developmentally appropriate behavior, to health and wellness, to interactions with children and families, and professionalism. A 10-module series of Preventing Child Abuse and Neglect training is also regularly offered, as well as the 4-module Social and Emotional Foundations for Early Learnings training. The Department of Health and Senior Services, through its MOU with the Lead Agency, offers the A Place for All Children training (14 modules) designed to help child care providers understand working with special needs children and how to create an inclusive environment.

Although all of the above-mentioned training options have been available to them, to date, there have not been any specific training requirements in place for those non-licensed child care providers registered with the Lead Agency to receive payment for providing care to

children receiving child care subsidies. In most cases, these child care providers are caring for four or less non-related children in their home and are family, friends, or neighbors who have no formal child care training. Due to passage of the law, however, as discussed at 6.1.4, the Lead Agency is in the process of promulgating rules to pre-service and core training for these providers, which will be available via the Missouri Workshop Calendar as described above. These training sessions are meant to be introductory in nature for these care providers, but broad enough in nature that they will provide the care provider a general understanding of the nature of their responsibility and, hopefully, the desire to continue their professional development via the system already in place.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

☒ Financial assistance for attaining credentials and post-secondary degrees.

Describe.

Partner with Department of Elementary and Secondary Education to make funds available for individuals to gain a Child Development Associate (CDA) credential.

☐ Financial incentives linked to education attainment and retention.

Describe.

N/A

☐ Registered apprenticeship programs.

Describe.

N/A

☐ Outreach to high school (including career and technical) students.

Describe.

N/A

☐ Policies for paid sick leave.

Describe.

N/A

☐ Policies for paid annual leave.

Describe.

N/A

☐ Policies for health care benefits.

Describe.

N/A

☐ Policies for retirement benefits.

Describe.

N/A

☐ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services).

Describe.

N/A

☒ Other.

Describe.

Child care rate enhancements over their base rate are available to child care providers for those that provide services to a child with special needs (25%), have obtained accreditation by an accrediting organization recognized by the Lead Agency (20%), and/or, if licensed, provide care for a disproportionate share (a minimum of 50% of the total number or children in their care) of children receiving child care assistance from the Lead Agency (30%).

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language.

Describe.

The Lead Agency meets with the state's four regional Refugee Resettlement agencies on a quarterly basis. Discussions to be held on developing a plan that will address recruitment of providers for whom English is not their first language. The Lead Agency will use current interpreter services to communicate with the recruited providers.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

☒ Informational materials in non-English languages

☒ Training and technical assistance in non-English languages

☐ CCDF health and safety requirements in non-English languages

☐ Provider contracts or agreements in non-English languages

☐ Website in non-English languages

☐ Bilingual caseworkers or translators available

☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

☐ Other.

Describe.

N/A

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages

Spanish and Bosnian and the state agencies maintain a contract with translation and interpretation services.

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.

The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families.

Describe that training and technical assistance for providers

☒ No. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut

and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) [09/30/2016](#)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) [Partially implemented](#)

Unmet requirement - Identify the requirement(s) to be implemented [Use CCDF for activities to improve quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Modify agreements with CCRRT to develop and/or identify trainings that will give child care providers foundational knowledge in identifying and serving homeless children and families.](#)

Projected start date for each activity: [03/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead Agency](#)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
[CCRRT provider](#)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

[Develop plan with CCRRT and the Department of Health and Senior Services to promote with child care providers the importance of acquiring foundational knowledge on identifying and serving homeless children.](#)

Projected start date for each activity: [03/01/2016](#)

Projected end date for each activity: [09/30/2016](#)

Agency - Who is responsible for complete implementation of this activity [Lead](#)

Agency

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

CCRRT provider and Department of Health and Senior Services

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 If checked yes to 7.1 in the next section, check which content is included training and professional development activities. Check all that apply.

☒ Yes, If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

The Lead Agency reviews data on the number of training participants, the type and amount of trainings offered and completed, the number of providers that become licensed and in compliance, the number of providers participating in CDA programs through Lead Agency funding, and the education level of child care professionals.

b) Indicate which funds will be used for this activity (check all that apply)

☒ CCDF funds.

Describe:

CCDF Quality Set Aside funding.

☐ Other funds.

Describe:

N/A

c) Check which content is included in training and professional development activities. Check all that apply.

☒ Promoting the social, emotional, physical, and cognitive development of children,

including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

The Lead Agency contracts with Child Care Aware of Missouri to provide statewide clock hour training on developmentally appropriate practices for infants and toddlers, infant/toddler development and well-being, etc.

☒ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

The Lead Agency contracts with Child Care Aware of Missouri to provide statewide clock hour training on social-emotional development of infants, toddlers, and their families, helping parents and providers understand temperament, supportive responses to troubled parent-child interactions, challenging behaviors in infants and toddlers, etc.

☐ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development.

Describe:

N/A

☒ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards.

Describe:

All training provided via the statewide training calendar is aligned with the Core Competencies for Early Childhood and Youth Development Professions (Kansas and Missouri).

☐ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development.

Describe:

N/A

☒ Using data to guide program evaluation to ensure continuous improvement.

Describe:

Child Care Aware of Missouri, the Lead Agency's resource, referral, and training contractor, collects evaluation data from participants after every training session that was posted on the Missouri Workshop Calendar is completed; information from these evaluations is use to determine whether the training was presented in a meaningful manner, the participant will use what was learned on the job, the level of content and presentation was commensurate to the audience, the location where the training was held was convenient within the geographic region was convenient and conducive to learning, etc. and makes adjustments accordingly.

☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.

Describe:

N/A

☒ Caring for and supporting the development of children with disabilities and developmental delays.

Describe:

The Lead Agency provides substantial funding to the Department of Health and Senior Services, Section for Child Care Regulation, which is responsible for awarding an annual Inclusion Services contract and providing "A Place for All" inclusion training, available statewide to all child care providers via registration on the training calendar maintained by Child Care Aware of Missouri.

☒ Supporting positive development of school-age children.

Describe:

The Lead Agency provides substantial funding to the Department of Elementary and Secondary Education, which funds the Missouri Afterschool Network, which is a co-funder, along with the Lead Agency, of the OPEN Initiative's Missouri Professional Development Registry.

☒ Other.

Describe:

The Lead Agency contracts statewide with various agencies to provide Educare

services to non-licensed child care providers and licensed in-home providers contracted with the Lead Agency; these services consist of on-site visits to the providers for the purpose of safety checks, technical assistance, incorporation of the Strengthening Families Initiative Protective Factors into their program, and delivery of a research-based curriculum to increase the providers' knowledge of child development, social-emotional development, child/parent interactions, child behaviors, etc.

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

☐ Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling

☐ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities

☐ Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

☒ Other.

Describe:

The Lead Agency contracts with Child Care Aware of Missouri, which is the license holder in Missouri for T.E.A.C.H. Missouri, an educational scholarship opportunity for early childhood professionals in licensed child care center-based, group-based, and family child care centers. Funding provided by the Lead Agency to the Department of Elementary and Secondary Education partially funds T.E.A.C.H. Missouri.

☐ No.

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas?

States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.

☒ Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

0

2) Number of on-going hours and any required areas/content

12 hours of ongoing training on the Missouri Workshop Calendar, approved trainings through the Department of Health and Senior Services or sponsored by Local Public Health Agency or Fire Safety staff.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content

0

2) Number of on-going hours and any required areas/content

12 hours of ongoing training on the Missouri Workshop Calendar, approved trainings through the Department of Health and Senior Services or sponsored by Local Public Health Agency or Fire Safety staff.

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content

0

2) Number of on-going hours and any required areas/content

12 hours of ongoing training on the Missouri Workshop Calendar, approved trainings through the Department of Health and Senior Services or sponsored by Local Public Health Agency or Fire Safety staff.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

N/A

2) Number of on-going hours and any required areas/content

N/A

☐ No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

☒ Fully implemented - as of March 1, 2016.

Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

Educare contractors provide education and technical assistance to child care providers receiving subsidy to enhance all aspects of their business practice. The Lead Agency partners with the Department of Health and Senior Services' Section for Child Care Regulation and the Child Care Review Team to go on-site and work with providers to focus on the administrative aspects of their business, i.e., maintaining records, fiscal management, and attendance logs.

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State's early learning and development guidelines appropriate for children from birth to kindergarten entry.

- ☒ The State assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
 - Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
 - Updated as determined by the State. List the date or frequency

On-going

- ☒ Fully implemented and meeting all Federal requirements outlined above - as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below
- ☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions

only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with to complete implement this activity

6.3.2 Check for which age group(s) the State has established early learning and development guidelines:

☐ Birth-to-three

Provide a link:

N/A

☐ Three-to-Five

Provide a link:

N/A

☒ Birth-to-Five

Provide a link:

<http://dese.mo.gov/early-extended-learning/early-learning/missouri-early-learning-standards>

☐ Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards).

Describe and provide a link:

N/A

☐ Other.

Describe:

N/A

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

☒ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

☐ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines.

Describe:

N/A

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

N/A

☒ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines.

Describe:

The Lead Agency contracts statewide with various agencies to provide Educare services to non-licensed child care providers and licensed in-home providers contracted with the Lead Agency; these services consist of on-site visits to the providers for the purpose of safety checks, technical assistance, incorporation of the Strengthening Families Initiative Protective Factors into their program, and delivery of a research-based curriculum to increase the providers' knowledge of child development, social-emotional development, child/parent interactions, child behaviors, etc.

☒ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

The Lead Agency contracts statewide with various agencies to provide Educare services to non-licensed child care providers and licensed in-home providers contracted with the Lead Agency; these services consist of on-site visits to the providers for the purpose of safety checks, technical assistance, incorporation of the Strengthening Families Initiative Protective Factors into their program, and delivery of a research-based curriculum to increase the providers' knowledge of child development, social-emotional development, child/parent interactions, child behaviors, etc.

☒ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

The Lead Agency contracts statewide with various agencies to provide Educare services to non-licensed child care providers and licensed in-home providers contracted with the Lead Agency. These services consist of on-site visits to the providers for the purpose of safety checks, technical assistance, incorporation of the Strengthening Families Initiative Protective Factors into their program, and delivery of a research-based curriculum to increase the providers' knowledge of child development, social-emotional development, child/parent interactions, child behaviors, etc.

b) Indicate which funds are used for this activity (check all that apply)

☒ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Educare is funded through the Quality Expansion Target utilizing CCDF funding.

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

N/A

6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used to deny children eligibility to participate in the CCDF program
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

☒ Yes.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality

activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)
- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
- 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
- 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
- 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
- 8) Supporting providers in the voluntary pursuit of accreditation
- 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a

combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement?

Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

The overarching goals for quality improvement include enhancing early childhood professional development and expanding early childhood data systems. The goals were selected by reviewing the priority needs assessment completed by the Missouri Head Start State Collaboration Office for the State of Missouri.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

☐ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

N/A

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

N/A

☒ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)

☒ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Infant and toddler set aside.

☒ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state

or local funds, etc.)

[State general revenue.](#)

☒ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)

☒ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

[Quality Expansion.](#)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

[N/A](#)

☒ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

☒ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

[Quality set-aside.](#)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

[N/A](#)

☐ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

[N/A](#)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

[N/A](#)

☒ Supporting accreditation. If checked, respond to 7.7. Indicate which funds will be used for this activity (check all that apply)

☒ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality

☒ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

General state revenue.

☐ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

N/A

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

N/A

☒ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9. Indicate which funds will be used for this activity (check all that apply)

☒ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality expansion target.

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

N/A

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

☐ Yes, the State/Territory has a QRIS operating State/Territory-wide.

Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available

N/A

☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide.

Provide a link, if available

N/A

☐ No, but the State/Territory is in the development phase

☒ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

☐ Participation is voluntary

☐ Participation is mandatory for providers serving children receiving subsidy.

If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)

N/A

☐ Participation is required for all providers

☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

☐ Supports and assesses the quality of child care providers in the State/Territory

☐ Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

☐ Embeds licensing into the QRIS.

Describe:

N/A

☐ Designed to improve the quality of different types of child care providers and services

☐ Describes the safety of child care facilities

- ☐ Addresses the business practices of programs
- ☐ Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
- ☐ Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services.

If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality

N/A

- ☐ Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- ☐ Licensed child care centers
- ☐ Licensed family child care homes
- ☐ License-exempt providers
- ☐ Early Head Start programs
- ☐ Head Start programs
- ☐ State pre-kindergarten or preschool program
- ☐ Local district supported pre-kindergarten programs
- ☐ Programs serving infants and toddlers
- ☐ Programs serving school-age children
- ☐ Faith-based settings
- ☐ Other.

Describe:

N/A

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

Describe:

N/A

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers?

Check all that apply and describe.

☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

N/A

☐ Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

N/A

☒ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

Trainings that are approved by the State of Missouri to meet child care professional development requirements are available through the online Missouri Workshop Calendar; the Infant/Toddler Child Care Orientation Training is one example of the trainings offered, trainings are standardized and validated trainings. The Workshop Calendar is maintained by Child Care Aware of Missouri. The Educare contract offers technical assistance and training opportunities for child care providers free or at reduced costs.

- ☒ Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care.

Describe:

The Department of Social Services uses the infant/toddler targeted funds to increase the reimbursement rates for infant/toddler care to eligible child care providers in order to increase the number of infants and toddlers accessing licensed/regulate care.

- ☒ Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists.

Describe:

Child Care Aware of Missouri provides technical assistance/support for Missouri child care programs in response to specific needs presented by Missouri child care programs through the contract with the Lead Agency. Technical assistance/support includes, but is not limited to, providing educational resources and materials and assistance with information on child care-related topics including infant and toddler care.

- ☒ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.)

Describe:

The Lead Agency and the Department of Elementary and Secondary Education Early Learning Section coordinate services through the Interagency Early Childhood Team.

- ☐ Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

N/A

- ☐ Developing infant and toddler components within the State's/Territory's child care licensing regulations.

Describe:

N/A

- ☒ Developing infant and toddler components within the early learning and development

guidelines.

Describe:

Through a Memorandum of Understanding with the Department of Elementary and Secondary Education (DESE), the Lead Agency supports the continued development and implementation of early learning standards from birth to kindergarten; the guidelines are consistent with current research and recommendations from other state and national initiatives.

☒ Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care.

Describe:

Through the Lead Agency's contract with Child Care Aware of Missouri parents are able to access easy to understand information about the availability of high-quality infant and toddler care and are able to receive assistance with the selection of child care.

☐ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being.

Describe:

N/A

☐ Other.

Describe:

N/A

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency monitors the number of child care infant/toddler providers that are receiving a rate differential. This rate differential is child specific. The Lead Agency also monitors the number of clock hour trainings taken by child care providers in the infant/toddler category and the number of child care professionals that utilize the OPEN registry to track their professional development.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system

☒ State/Territory has a CCR&R system operating State/Territory-wide.

Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

Child Care Aware of Missouri (CCA of MO) is the statewide resource and referral agency contracted with the Lead Agency. CCA of MO operates regional agencies services all counties within Missouri. CCA of MO supports continuous quality improvement by offering training and professional development of the child care workforce, improving the implementation of early learning and development guidelines, improving the supply and quality of child care programs and services for infants and toddlers.

☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide.

Describe:

N/A

☐ State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

Child Care Aware of Missouri submits several reports that contain measures used to evaluate progress including the following reports:

- Results of an annual professional development needs assessment and training plan.
- The types and number of clock hour sessions offered and completed by providers to meet child care licensing professional development requirements.
- The total number of providers completing clock hour sessions.
- Results of clock hour session satisfaction surveys to identify success and improvement areas
- Agenda and participation results of Regional Collaboration Meetings (RCM) convened

and coordinated a minimum of four times per year per each geographic region for various early childhood partners and providers. The RCM includes a professional development component and discussion of training needs.

- Results of referral calls and online searches that connect families to appropriate child care.
- Follow-up response rates, success rates, and comments to identify consumer education and assistance provided for families seeking child care.
- Results of technical assistance calls to identify successes and areas that need improvement.
- Results of technical assistance provided to the business community on developing and/or supporting child care programs for employees which encourages business involvement to assist in increasing the capacity for child care that supports working families.

7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards?

Describe:

Through a Memorandum of Understanding with the Department of Health and Senior Services the Lead Agency supports compliance with state requirements through child care health and safety nurse consultations and trainings, child care sanitation inspections, child care complaint investigations, monitoring of all grant funded contracts associated with CCDF, and through the support of child care licensure inspection software.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Department of Health and Senior Services submits reports that contain measures used to evaluate progress including the following reports:

·End of the fiscal year report that summarizes the total number of child care providers by program, number of providers investigated, number of providers revoked, on probation, suspended, approved applications and denied applications

- Number of hours consulting/training child care providers by the nurse health consultants, the number of providers that were provided consultation/training with the number of children impacted, number of health promotion activities provided to young children in child care; and
- Number of health and sanitation inspections conducted by county, number of re-inspections by county, and number of sanitation trainings by region

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings.

Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children

Missouri will develop a plan on how to measure the quality and effectiveness of child care programs by measuring provider improvements. The plan will use the following indicators to show provider improvement: the number of registered providers becoming licensed; the number of facilities becoming accredited, and the number of providers are completing trainings above and beyond what is required.

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency will measure the progress in improving the quality of child care programs and services by tracking the number of registered providers who opt to become licensed Family Child Care Homes and the number of child care facilities becoming accredited each fiscal year. In addition, the Lead Agency will measure improvement in quality by tracking the

number of license-exempt and registered child care providers completing the required trainings and the number of trainings completed above the required topics.

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

☒ Yes, the State/Territory has supports operating State/Territory-wide.

Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation

The Lead Agency offers a 20% rate differential to child care centers and family child care homes that are accredited by a national accrediting body with demonstrated, valid, and reliable program standards of high quality.

☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide.

Describe:

N/A

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency monitors the number of child care providers paid a rate differential due to accreditation and the number of children that receive child care services in an accredited setting.

7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development?

Please describe:

N/A

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

N/A

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

OPEN is a registry for early childhood professionals that collects workforce data via a web-based data system. OPEN supports an integrated and seamless career development system and works closely with early childhood, afterschool, and youth development partners in the areas of standards development, including Core Competencies, that establishes a set of standards for early care and education and defines what professionals need to know and do to provide quality care. The registry streamlines professional development data and allows communities and policy makers to access data to support the decision making process regarding quality initiatives.

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new requirements.

Describe:

State regulations have been reviewed and revised by the Lead Agency to submit for promulgation.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements.

Check all that apply.



Issue policy change notices

☐ Issue new policy manual

☒ Staff training

☐ Orientations

☒ Onsite training

☒ Online training

☒ Regular check-ins to monitor implementation of the new policies.

Describe:

Lead Agency holds quarterly meetings with staff from the Family Support Division. The purpose of these meetings is to review upcoming or recent policy changes and discuss any issues related to implementation.

☒ Other.

Describe:

Family Support Division (FSD) supervisors complete child care case reviews each month. The Lead Agency assigns a program development specialist to complete a second level review of the cases reviewed by FSD. The second level review ensures that the FSD supervisors are correct in their reviews and to define error trends.

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF.

The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors"). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing

contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

Describe:

An annual risk assessment is completed on each sub recipient and contractor receiving CCDF to determine the level of monitoring. Monitoring is either an on-site monitoring or a desk audit. Each form of audit uses a monitoring tool that is developed annually based on contractual requirements. Upon completion of a monitoring the Lead Agency's management team reviews the results and approves the monitoring. The assigned Program Development Specialist, from the Lead Agency, meets with the contractor to review the monitoring results and if necessary develops a plan to correct any areas in which the contractor is found out of compliance.

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency.

Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

☐ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

☐ Run system reports that flag errors (include types)

Describe:

N/A

☒ Review of enrollment documents, attendance or billing records

☒ Conduct supervisory staff reviews or quality assurance reviews

☐ Audit provider records

☒ Train staff on policy and/or audits

☐ Other.

Describe:

N/A

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

N/A

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

☐ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

☒ Run system reports that flag errors (include types)

Describe:

Flag absence and holiday errors, duplicate authorizations, reports on holiday usage, and reports based on provider risk assessments.

☒ Review of enrollment documents, attendance or billing records

☒ Conduct supervisory staff reviews or quality assurance reviews

☐ Audit provider records

☒ Train staff on policy and/or audits

☐ Other.

Describe:

N/A

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

N/A

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as

defined in your State/Territory?

The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

- ☒ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: \$5.00

- ☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- ☒ Recover through repayment plans
- ☒ Reduce payments in subsequent months
- ☐ Recover through State/Territory tax intercepts
- ☐ Recover through other means
- ☒ Establish a unit to investigate and collect improper payments.

Describe:

Child Care Review Team, within the Division of Finance and Administrative Services, conducts provider risk assessments to determine which providers in which to conduct review. In addition, referrals may be made to the review team by the payment unit or Lead Agency when payment or billing issues are identified.

- ☐ Other.

Describe:

N/A

- ☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines

N/A

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

- ☒ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: \$5.00

- ☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- ☒ Recover through repayment plans
- ☒ Reduce payments in subsequent months
- ☐ Recover through State/Territory tax intercepts
- ☐ Recover through other means
- ☐ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

N/A

- ☒ Other.

Describe:

Referrals may be made to the Welfare Investigation Unit, within the Department of Social Services legal division, for further investigation and possible referrals to the prosecuting attorney. In addition, the Lead Agency may terminate a providers contract to receive child care subsidy.

- ☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines:

N/A

c) Check which activities the Lead Agency will use for administrative error?

- ☒ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: \$5.00

- ☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- ☒ Recover through repayment plans
- ☒ Reduce payments in subsequent months
- ☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☒ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

The Child Care Review Team (CCRT) established within the Division of Finance and Administrative Services compliance unit in 2013 develops a plan to monitor child care providers using a risk-based data-driven approach. CCRT conducts onsite and desk reviews of high risk or referred providers to determine compliance with record keeping and billing. Providers found to have an overpayment are referred to the Child Care Payment Unit to establish a claim and initiate recoupment of overpayments.

☐ Other.

Describe:

N/A

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

N/A

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

☒ Disqualify client.

If checked, please describe, including a description of the appeal process for clients who are disqualified:

Clients cannot receive child care assistance if no repayment agreement is in place and payments aren't being made. Clients may file an appeal with the Division of Legal Services administrative hearing unit.

☒ Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

The Lead Agency will not contract for subsidy if the provider has committed fraud in the child care subsidy program, and has been prosecuted in criminal court.

☐ Prosecute criminally

☐ Other.

Describe:

N/A